THE LANCET.

DR. BLUNDELL'S

INTRODUCTORY

PHYSIOLOGICAL LECTURE.

Theatre, Guy's Hospital,

WEDNESDAY, OCTOBER 5, 1825.

In considering the substances which enter into the composition of the bodies with which our planet is furnished, we find that in a small number of them continual changes have been wrought by the industry of man for his own purposes; while much the larger portion of them, or, in other words, those which constitute the principal bulk of the globe, are left in that condition into which they have been brought by the operations of Nature; hence the distinction which arises between substances which are artificial and those which are natural. When, again, directing our attention to the natural objects with which the globe abounds, we come to examine them with a little care, we find that a part of them, small in bulk though not in number, are in possession of powers of generation, and of taking up within themselves substances which are afterwards assimilated to their own nature; while others are destitute of these powers, and destitute also of that organisation and vital energy on which these powers depend. This leads to another grand division of the substances with which our planet is furnished, namely, those which belong to organised and animated nature, and those which belong to unorganised and inanimate nature.

In the enlarged and most extensive acceptation of the term, Physiology signifies the science which has for its object natural substances generally; the powers with which these substances are invested; the laws which regulate these powers; and, where they are cognisable by the human intellect, the causes upon which these laws and powers depend.

It is not, however, in this enlarged acceptation that the term physiology is generally employed, and especially in the schools of medicine; by physiology we more frequently mean nothing more than the science which has for its object the *living* substances of our planet; their powers and laws, and the causes on which they severally depend.

Even in this more circumscribed but still extensive signification, physiology divides itself into, at least, three parts, which, although essentially connected with each other, are, at the same time, so far separated as to admit of distinct classification. There is the physiology of the human body, the physiology of the inferior animals, and the physiology of plants.

In medical schools, it is in its most confined sense that the term physiology is used; by it we mean usually nothing more than the physiology of the human body, and although we occasionally embrace under that term inquiries as to the physiology of animals, and more rarely that of vegetables, yet these branches of the science are only so far considered as they are calculated to throw light upon the powers and laws by which the human body is regulated, and upon which its functions depend. In all these different senses, however, the term physiology will be occasionally used in the course of the following lectures. A teacher who undertakes to deliver a course of lectures upon this grand subject (a subject which the more you study it, the more you will find deserving of your attention) may, if he pleases, take into consideration the

laws and powers of living bodies generally, or he may confine his attention to the laws and powers of one particular animal structure, as, for example, the human body. No man has a greater respect than I have for the character of a naturalist—a man who studies physiology generally; but much as I esteem the character and the talents of some of our naturalists, I should respect them still more if I found them more actively engaged in the search of original knowledge, instead of laying out their minds in the invention of systems of nomenclature and schemes of arrangement, or the apt composition of neat formularies for the expression of knowledge of which we are already in possession.

In medical schools, in the medical chair from which I have the honour of addressing you, it is not the office of a teacher to form naturalists for the profession. If a man is a mere routine practitioner—if he is contented with prescribing by a sort of habit, without thinking on the various cases which come under his notice, very little intellectual exertion is then necessary; and even when the mind is devoted more philosophically to the study of the healing art, a powerful intellect may require something in addition to occupy it. Under these circumstances physiological studies, in their more enlarged sense, become highly acceptable, as well as useful; however, as most of you will have to direct your main attention to other studies, and as you will find a great deal in medicine and surgery to occupy your minds, it will be scarcely possible for you to devote much of your time to the study of natural history. I have therefore come to a determination of not treating of physiology in general, but rather of confining my remarks to that branch of the science which is likely to be of most advantage to you in the study of your profession, namely, the physiology of the human body.

In directing your attention to the physiology of the human body, two different courses are open to me; I might endeavour to get together an assemblage of all the different subjects which human physiology embraces, and record them in a correct and logical order, so as to form a complete system; or I may pursue another course, which I much prefer, because I think it likely to be much more advantageous to you; out of these numerous subjects I may select such as, in the present state of our medical and surgical knowledge, it is most important that you should be acquainted with, in order to practise your profession with success.

The doctrines of physiology, as men of strong, sound, as well as speculative understanding will perceive, divide themselves into two sorts; some which are extremely interesting as subjects of curious investigation, and others, which are perhaps less interesting, but of much greater importance in the study of medicine and surgery. It is to those parts of physiology, which will be found to be of the greatest importance in practice, to which, in these Lectures, I shall chiefly confine my attention.

I have one other remark, however, to make in this place. There are certain things, in the branch of physiology of which I propose to treat, so familiarly known, and so generally admitted, that they are to be found in almost every book and every lecture on the subject; while there are other parts requiring more investigation, and which have been made the subject of original experiments, of which you can only obtain information from some particular sources. In selecting the materials of these lectures I have borne this consideration in view. To those parts of physiology in which I have laboured myself, and in which I have acquired some experimental knowledge deserving of your attention, not because it comes from this chair, but because it is *experimental* knowledge, I shall more particularly advert, while I shall not insist on those parts of the science which may be readily learned from any elementary treatise. If you ask me what elementary treatises I should recommend, I would mention the works of BLUMENBACH, MAGENDIE, and RICHERAND. For lucid arrangement, and the condensed, but explicit, manner in which the various parts of the science are explained, the work of BLUMENBACH is especially distinguished, though in making this remark I by no means wish to be understood as depreciating the labours of other physiologists. Above all, I would recommend you to think for yourselves; if men were more in the habit of thinking for themselves, they would be less disposed to adopt the systems and schemes of arrangement which have been framed by others. A system of thinking which suits one original mind may not appear advantageous to another mind equally original. For my own part, in reflecting upon the different substances which have fallen under my notice, as a physiologist, I am led to divide the animal powers of which physiologists treat, in the following

manner: those of assimilation, organization, ventilation, motion, generation, the powers of the mind, and those powers which are operative in the two states of vitality, passive as well as active.

It is not my intention to treat at equal length of all the various powers which I have enumerated; I shall confine myself chiefly to those of assimilation, ventilation, motion, generation, and life. With respect to the powers of organization, all that has been written seems to be merely superficial and ill ascertained; and our knowledge of the sensorial powers, or the powers of mind, is in a very confused state. When I began these studies the physiology of the nervous system was in a very inert and torpid state; but the recent researches of Le Gallois, Gall, Bell and Magendie have done much to throw light on this most important part of the science. Of the sensorial system, our ideas are in a very distracted state, and a number of interesting experiments have been instituted. Knowing, however, as I do, the uncertainty of physiological evidence, I am unwilling to state, in this theatre, novel and important opinions, the truth of which I have not yet myself verified by repetition of the leading experiments.

In transferring our attention from the material to the intellectual world, it is obvious that, with reference to intellect, men are divided into two very distinct classes,—both excellent and useful in their places, but still perfectly distinct. In the first, and by far the larger class, we find individuals formed rather to receive knowledge than to think for themselves. Among men of this kind, we find talkers of science and compilers of science; men capable of communicating, in an agreeable and useful manner, knowledge, not original, but already acquired. Again, when we turn our attention to the other class of minds, we find men of more vigorous powers, capable of thinking for themselves, fond of thinking for themselves—men who take more pleasure in the operations of the intellect than in the Circean styes of sensuality. This class of men, endowed with more vigorous and active minds, are not satisfied with merely acquiring those parts of science which are already known, but they make incursions into unknown regions, and subjugate, as it were, fresh territories of the intellectual world.

To those individuals who belong to the first class I have mentioned—who are capable rather of receiving information than of extending the boundaries of knowledge, I would recommend an assiduous attendance at lectures, whether physiological or anatomical, and a minute and regular attention to the routine of study; but to the other class of men—the demigods of the human species, the connecting link between man and superior intelligences, I would hold a different kind of language. The first piece of advice which I would give to such men, (though indeed such men would hardly need advice,) is to think for themselves. I love physiology for the good it has done for the human race, but I am ashamed to confess how full the system is of errors—how full of false opinions—how fettered with prejudices, by which, like Enceladus under Ætna, even the most vigorous minds are oppressed. *Think for yourselves*, is the first lesson which I would inculcate; do not let my opinions, or the opinions of any of my distinguished colleagues, have more weight with you than truth and Nature entitle them to. In religion Faith is essential; in physiology, a philosophical scepticism.

The next piece of advice which I would address to men of this class is, to avoid an error, into which, indeed, such men are not likely to fall. I would advise them to think and reason for themselves; but not to begin to reason without getting together a sufficient collection of facts, which are the atoms of which the universe of knowledge is composed. Facts are the substratum upon which the solid pyramid of science is built. When I see a man of limited intellectual powers engaged in reading medical or physiological books, it pleases me, because reading is a source from which such a man is likely to derive knowledge; but when I see a man of genius thus employed, I must acknowledge that it gives me regret; because such a man is born for nobler things; such a man is destined, not to adopt the ideas of others, but to give, to a certain extent, the intellectual law to mankind itself. With this impression on my mind, I still allow, what must be allowed by all, that books furnish the source from which very valuable facts may be learnt. But knowledge acquired in this way is of infinitely less value than that derived from your own observation. In the first place, you can never be sure of your authority; how often have we to regret the inaccuracy of medical writers! and then false facts generate erroneous notions and impressions, which it may afterwards be extremely difficult to eradicate.

Another very valuable source of knowledge is conversation; and I am free to confess that some of the most valuable physiological facts which have come to my knowledge have been furnished to me in this way. For my own part, I would much rather hear a sensible man relate a case involving some valuable fact, than read a whole quarto of physiological disquisition. Besides, you have the advantage of cross-examining such a witness, and ascertaining how far his observations are correct, and where they may be erroneous. Facts got together in conversation with your fellow-students will be of more service to you than those derived from books,; since the latter are too often coloured to serve a purpose, or decorated, like players upon the stage, to perform a part.

A third and most important source of physiological knowledge, which is indeed worth all the rest put together, will be your own observations upon the human body. These Hospitals are not places to lounge and trifle in; the wards of these Hospitals are places in which you may daily study and observe the great experiments of Nature. A man has his abdomen laid open, the wound heals by the first intention, and he gets well. Is not this a fact worthy of observation? A man is at the point of death from hæmorrhage, and he is saved by an injection of blood into his veins. Is not this a fact worthy of observation? A man has his leg amputated, and in five weeks the wound is healed, and he is restored to health. Are not all these facts worthy of your observation? What are they, indeed, but so many great experiments of Nature?

Another valuable source of physiological knowledge is one which has been absurdly denounced in the senate, at the bar, and even from the pulpit,—I mean that of experiments upon animals; not wanton and cruel experiments, but such as are justified by the object we have in view in instituting them. They who object to the putting of animals to death for this purpose do not reflect that the death of an animal is a very different thing from that of man. To an animal, death is an eternal sleep; to man, it is the commencement of a new and untried state of existence. Can no object whatever justify us in putting animals to pain? Are not the very persons who raise these objections in the habit of torturing animals in hunting? Do they not murder pheasants and massacre partridges? Is not pain daily and hourly inflicted on the inferior animals to contribute to the support or pleasure of man; and shall it be fastidiously objected to, when inflicted for the purpose of advancing physiological and medical knowledge? Shall it be said that the objects of physiological science are not worth the sacrifice of a few animals? Men are constantly forming the most erroneous estimates of the comparative importance of objects in this world. What influence, I ask, has the battle of Actium now on the destinies of mankind? what will the battle of Trafalgar have a thousand years hence? Of what importance is it now to mankind whether Antony or Augustus filled the imperial throne, and what will it matter, a few centuries hence, whether England or France swept the ocean with her fleets? But mankind will always be equally interested in the great truths deducible from science? and in the inferences derived from physiological experiments. The fact that life may be saved by the transfusion of blood into the veins will be as beneficial a thousand years hence as it is at this day. I will ask, then, whether the infliction of pain on the lower animals in experiments is not justified by the object for which those experiments are instituted, namely, the advancement of physiological knowledge? Is not the infliction of pain, or even of death on man, often justified by the end for which it is inflicted? Does not the judge sacrifice the criminal for the good of society? and the general lead his troops to slaughter to preserve the liberties of his country? It is not the infliction of pain or death for justifiable objects, but it is the taking a savage pleasure in the infliction of pain or death which is reprehensible. The Iagos and Zelucos of the human race, the men tigers, who delight in cruelty, are just objects of abhorrence; but when animals are sacrificed on the altar of science that Nature may reveal her secrets, the means are consecrated by the end for which alone experiments are instituted by the votaries of knowledge and the friends of the human race. Here, then, we take our stand; and we defy the puny drivellers of the press—the declamatory and spurious orators of the day—to drive us from it. We defend the sacrifice of animals in so far as it is calculated to contribute to the improvement of science; and, in those parts of physiological science immediately applicable to medical practice, we maintain that such a sacrifice is not only justifiable, but a sacred duty. How many persons have perished before it was known that transfusion might be

employed, or that the abdomen might be laid open? Suppose you had a dear friend at the point of death, and you were told that an important physiological discovery, drawn from experiments on animals, enabled you to save his life, would you not hail the intelligence with flushed cheek and kindled eye, and scorn the miserable abuse which has been poured forth on such experiments by the brawling, scribbling fools of the day?

It is the province of genius to discover new principles, and these are sometimes directly suggested by experiments, or they sometimes flash suddenly upon the mind, and are afterwards confirmed by observation and experiments. Thus NEWTON discovered the law of gravitation by observing the fall of an apple: BLACK was led to his theory of latent heat by the boiling of a kettle, and PYTHAGORAS discovered that important theorem in which it is demonstrated, that the square of the hypothenuse is equal to the squares of the other two legs of a right-angled triangle at the moment of plunging into the bath, and was so rejoiced at the discovery that he immediately jumped out of the water, exclaiming with exultation EυρηκΑ. When we meet with any new truths, we should consider what old opinions they subvert, what new opinions they support, and what useful conclusions they lead to. Thus when we find that a man has his abdomen laid open by an accident, and that the wound afterwards heals, and he gets well, we infer that the opinion once entertained that the peritoneum could not be wounded, without destruction of life, must be erroneous. We find that we may lay open the abdomen of a dog, a cat, or a rabbit without destroying life, and that we may inject blood into their veins with a syringe, and we are led from these facts to the important inference, that in the *human subject*, probably the abdomen may be laid open too, or blood injected into the veins. We know now that the large wound formed by the amputation of a limb, may be in a great measure healed by the first intention, or rather by the process of adhesive inflammation; but it is only within the last half century that this process has been understood, and that a wound is healed in six weeks, instead of six months.

As the memory is perhaps, of all the mental faculties, that which becomes most speedily enfeebled, especially in those who labour much with the mind, it is necessary to have recourse to some expedient to secure your ideas, and an "adversaria" is excellently adapted for this purpose. By the celebrated philosopher LOCKE, a form of common-place book has been proposed, which I have found, on trial, to answer eminently well. The plan of which is the following: provide yourselves with a quarto volume, containing from 2 to 300 leaves of blank paper. Page this volume, and record in it all those ideas which you think worth preserving (indifferently) on all topics, writing straight forward page after page, without arrangement of articles. In order that supplementary thoughts may be inserted, the left hand page should be left blank. Without a ready reference to what has been set down, it is obvious that, as the work enlarges, it will become of little practical service, and it is therefore necessary to have a good index, similar to that suggested by Mr. Locke. For example, let a number of blank pages at the beginning of the work be assigned for the purpose, allowing one to each letter of the alphabet. Let each page be divided into five equal columns, the head of which mark the five vowels. When an insertion is made in the body of the book, three or four words, which the writer is certain will recur to his recollection, are to be selected as the *indicators*. On the page of the initial letter and in the column devoted to the first vowel (not initial) of the indicator, this word with an annexed reference, is to be set down, with the number of the page affixed. By this simple contrivance, it will be found, on trial, that we can not only find with facility any article, but we may also select from the confused mass a series of articles on the same topic, and bring them together as effectually as if they had originally ranged under one general head. Thus if you were recording a case in which the subclavian artery had been dexterously and

successfully obliterated by ligature, the name of Mr. KEY, as well as that of the artery itself, would, I am sure, be suggested to the mind. These words, therefore, might be used as the indicators, and the name of my ingenious Colleague would be inserted on page K, and in the vertical column E, whilst that of the artery would stand on page S, column U, the number of the page being, of course, affixed to each indicator.

But, gentlemen, it is not sufficient that you think for yourselves, and that you even get together your facts; from these facts principles must be deduced, if you aspire to the merit of enlarging the sphere of physiological knowledge.

To those who delight rather in intellectual than in animal enjoyments, its study cannot fail to afford the purest and highest gratification. If physiology were merely a source of intellectual amusement—if it were only a sort of philosophical toy, it would still be a very splendid and magnificent bauble; but it is something more than this; it is not merely a source of intellectual amusement, but it forms the mind to medical knowledge. What mathematics are to science in general, physiology is to the medical man; it teaches him to think for himself, to collect facts, to reason on and apply those facts to the treatment of disease. Another, and the most splendid recommendation of physiology is, that it suggests to the mind new discoveries, and new operations. Whatever of truly great or useful man has achieved has been effected by observing the substances of Nature, tracing the laws by which the God of Nature acts, and acting upon natural bodies through a just comprehension of those laws. The balloon rises, and the lightning falls as man directs it, because we understand the principles of aerostation and electricity. What knowledge has done in the world generally, physiology, even in its most confined and limited acceptation, has in a great degree enabled us to effect in the science of medicine. It is a science which by teaching us the powers of natural bodies, and the laws by which these powers are regulated, puts these bodies, as it were, into our hands, so that we may mould them at our will. It has enabled us to give sight to the blind, hearing to the deaf, fingers and toes, I had almost said feet, to the lame. Can a man have his abdomen laid open and recover? Physiology teaches us that he may. Can life be restored when the patient is dying from bleeding, by the transfusion of new blood into the veins? Physiology teaches us that it has been so restored. Can a fourth part of the human body be cut away, by the amputation of the thigh at the hip joint, and the expanse of wounded surface heal by the first intention? Physiology teaches us that it may. This is the crown of physiology;—by putting us in possession of the powers of natural bodies, by reading us a lecture, as it were, on the jurisprudence by which those powers are regulated, and by thus making us acquainted with those laws and powers, she enables us, to a certain extent, to mould the material world at our pleasure, and to work on natural bodies at our will. Realizing, in some degree, the tales of romance, she leads us, like Vathek, into the intimate recesses of nature, and puts into our hands the talismans by which her operations are controlled.

[The learned Lecturer concluded midst loud and enthusiastic applause, roma]numerous and highly respectable class.

DR. NUTTALL.

New Anatomical Theatre, Little Windmill-street.

Introductory Address to a Course of Lectures on the Principles and Practice of Physic.

GENTLEMEN,

As you are well acquainted with the purposes for which we are assembled this day, I need not dwell upon them. They involve a solemn duty, which calls for much patient and diligent labour on the part of the teacher and pupil. In this place I am desirous of impressing on your minds a moral truth of much importance, which I have realized in my own personal experience. It is this, that from my earliest career, whenever I formed schemes of advancement in my professional calling, according to my own carnal views—according to what has *falsely* been deemed legitimate proceeding, through patronage, it has uniformly pleased Almighty God to frustrate my views, and to give me advancement only according as I pursued what may be *justly* styled legitimate conduct with ardour and diligence, as I attended to the various duties of my profession. I have the pleasure of seeing many gentlemen present long established in practice, who, as they are acquainted with the rise, progress, and comparative present state of medical science and art, will feel deeper interest in the exposition of the leading features of my classification of diseases, and the fallacy of CULLEN'S, so with the concurrence of the junior members, I will at once enter on this subject, deferring till Wednesday, the next lecture day, the tracing of the rise of our science. I have imposed upon myself an Herculean task in what I have undertaken; inasmuch, as though the materials with which I am to work cannot be said to be my own, their arrangement into form and order are mine, and in the execution of my plan no head or hand can materially aid me. You will, therefore, I trust, make allowances for the defects which must arise from these circumstances. One particular I wish to state further, that those gentlemen who attend these Lectures will have free access to the morbid examinations of the patients of the Westminster Dispensary, both before and after death. And now I have to hope that God will grant me strength of mind and industry proportioned to the efforts that will be required of me.

Whenever any individual promulgates any new doctrines or scheme on an important subject, it is incumbent on him to assign a reason for his dissenting from received opinions and established usage. Under the denomination of an innovator I must necessarily fall, and regard myself as called upon satisfactorily to explain the grounds of my conduct, before I attempt to proceed in the development of my plan, and in the function of an instructor. I need not dwell on the fact that CULLEN'S classification of diseases, ever since it got into circulation in this kingdom, has been the one regarded by all orders of medical men with the most favour of the many that have been presented to the world; by most teachers it has been made the text book of their lectures, and at most places, established by public authority as controllers of medical discipline, and as licensers of individuals to practise, it has been referred to as the standard book for examination. On what ground it became so universally adopted I shall first endeavour to explain, and then simply to point out its insuperable defects as a classification, or as a whole, at the same time showing its merits in individual parts. CULLEN'S Nosology, from among the many extant, was selected by the generality of physicians, on account chiefly of its being full of the nervous pathology, then in high vogue, introduced by the illustrious HOFFMAN, and even now, in this enlightened period, it still is with the generality of medical men in great estimation. Pleased with the idol—the hobby of the day, they forgot its defects; they forgot that it had no vitality in itself, that it was a mere shadow; they forgot that its supine moving power borrowed all its force from themselves, from notions purely adventitious and speculative. Perhaps by some it was passively, not cordially, received; their views being more clear and extended, with minds unfettered by prejudice, the great barrier (together with innate indolence) to the advancement of truth, and consequently human good, whether in art, science, or morals. By such it was adopted in the absence of a better, though seen by them to be incumbered with serious errors. By them it was referred to, not on account of the general distribution of the subject; not on account of the luminous arrangements or bright lights to direct them in the establishment of sound principles, and to lead them into a more profound acquaintance with the nature of individual diseases; but on account chiefly, I presume, of the many correct definitions which were richly scattered over the incongruous distribution of dis-

eases under false classes, but less exceptionable orders. Let us briefly enumerate the classes, and see if there be any links connecting the chain and regulating the judgment, so as to establish the presence of a master mind; if there be any unity in the design, so as to conduct the student, by an easy natural transition, by direct connexion, from the contemplation of one class to that of another.

His classes are four; the first certainly approaches to the character of a legitimate class, in reference to its orders and genera, and it professes to embrace diseases attended with fever, and is defined to be *pyrexia*, "a frequent pulse, coming on after an horror; considerable heat; many of the functions injured; the strength of the limbs especially diminished."

The second class he would have respect to diseases of the nervous system, regarding this system only of the sixteenth of the whole body as worthy of being raised to the rank of a class. He thus defines this class, *neuroses*, "an injury of the sense and motion, without an idiopathic pyrexia, or local affection."

The third class bears a reference to a false impression, relative to the existence of a depraved habit of body, as connected with, or arising out of, or giving rise to certain diseases. His definition of the class is as follows: *cachexiæ*, "a depraved habit of the whole or greatest part of the body, without primary pyrexia or neuroses."

Fourthly and lastly, his remaining class is to be composed of all diseases huddled together, which do not, according to his ideas, legitimately belong to any one of the foregoing classes, forsooth of all diseases which belong to the other fifteen systems, all of which put together, one would conceive he deemed as inferior in importance to, and consequently as unworthy of consideration in comparison of those of the nervous system, or second class, whether those diseases had their seat in the sanguiferous, absorbent, digestive, or respiratory systems, &c., or not.

The bare statement of these truths is sufficient to point out to you, gentlemen, the absurdity of his classes, nor will I abuse your understandings by dwelling longer on this head than to ask, what connexion can be traced between these four classes—between fevers, as the basis of one class; nervous affections, as forming the foundation of the second; depraved habit of body, as appertaining to the third; and local complaints, as characteristic of the fourth? under which last head, or class, ought not the second class, or that of nervous diseases, to fall for has the nervous system not a place assigned to it in the body?

In contemplating Cullen's classes, I never could behold any thing like rational conception; I never could comprehend how he could think of pawning on the world, and the world allow itself to be gulled by such a farrago of dissonant, undigested, and bewildering conceptions. When looking at his arrangement, I have insensibly regarded myself like a mariner at sea, without chart, compass, or rudder to guide, or even to aid him in his trackless path.

We shall next proceed to enumerate the different orders, which he has arranged under the foregoing classes, and though we shall have occasion to admit, to a certain degree, the legitimacy and natural connexion of many of the orders under the first, second, and fourth classes, and also the accuracy of those definitions, and the close connexion they bear to many of the genera they embrace, still the want of natural and the presence of forced connexion amongst the classes is enough to condemn it as a whole, independently of the hypothetical or imaginary relation of all the orders in connexion with the third class.

Under the first class come five orders, viz.:—

1. Febres, defined to be—pyrexia, without any primary local affection, following languor, lassitude, and other symptoms of debility.

2. Phlegmasiæ, defined to be—synochial fever, with inflammation or topical pain, the internal function of the part being at the same time injured, with sizy blood.

3. Exanthematæ—contagious diseases affecting a person only once in his life, beginning with fever, phlogosis appearing afterwards in small patches and dispersed over the skin.

4. Hæmorrhagiæ, defined to be—pyrexia, with bloody discharge from no external violence, blood sizy.

5. Profluvia—pyrexia, with increased secretion, not naturally bloody.

We will begin with those of the first class, and take the first order which presents itself, viz. febres. The relation of this member to its head is nearly complete; the genera, as he styles them, are also legitimately placed, viz. intermittentes continuæ, which embrace synocha, typhus, synochus. The second order, or phlegmasiæ, is not complete; for inflammation of slight character and of certain parts very generally exists without any feverish symptoms, the existence of which alone can entitle it to be ranked

under this class, *e. g.* slight rheumatism, slight cynanche, and slight ophthalmia. And, let me ask, if odontalgia or toothache be not as applicable to any other class as to that in which CULLEN has placed it, viz. in the first or feverish class? Is fever essential to it? does fever generally occur or arise out of it? I will answer, No! Then why is it planted here? Is it not better entitled to be ranged under the second class, (nervous affections,) on account of the excruciating pain, which depends on the exquisite morbid sensibility of the nerves? and yet this is not its legitimate class. Might you not say, that the third class, cachexiæ, has a better right to it as a genus than either of the two foregoing, on account of its more closely according in its leading feature, rottenness, with the definition of depraved habit of body; and yet the fourth class may, with equal fairness, claim it as its own, seeing that, after all, it is generally nothing more than a local, however painful, disturbance. In the third order, exanthemata, we observe greater allegiance to their class than in that which directly follows, if we except the genera miliaria, urticaria, and aphthæ, for fever invariably attends all the other genera. The fourth order, hæmorrhagiæ, ought not to have fever, specified as an invariable concomitant, attached to its definition. Epistaxis, when not a symptom of oppressed or overloaded brain, is generally unattended with the slightest feverishness, and hæmorrhosis generally exists without it; and under the fifth order, profluvia, we find that fever does not necessarily attend, precede, or follow as a natural consequence, *e. g.* slight catarrh.

Let us pass at once to the consideration of the inapplicability of the genera at large to the second class, or class of nervous affections, without stopping to regard the orders; and let us select diabetes, or dyspepsia, or asthma. Let us determine on the latter. Difficult respiration, wheezing, and cough, coming on at intervals, constituting the disease, (asthma) are they not frequently attended with symptoms of hectic fever, as it is most accurately defined by the late Dr. HEBERDEN in his Commentaries, though overlooked by writers and teachers? and if attended occasionally with hectic fever, it would be better to assign a place to it in the class above, viz. pyrexiæ. But others may say, No! we think it would be more judiciously arranged or disposed under the head, "depraved habit of body," for this reason, that a bloatedness answering to cachexiæ, often independantly of a present paroxysm, accompanies it; whilst, many may say, surely it is a disease of the respiratory apparatus, and ought to fall under the head or class locales, the lowest or fourth class.

Turning to the two first genera, diabetes and dyspepsia, we may inquire, Why has he not placed them under the class locales seeing that they have a local habitation? the more prominent phenomena of diabetes residing in the urinary system, whilst those of dyspepsia manifest themselves in the digestive; or as a parched, dry, fevered skin attends the subjects of diabetes, so it ought to be enumerated as one of the genera of pyrexiæ.

We will now pass into the third or most absurd of his classes, and take a cursory view of the orders, which are not less absurd, as they stand related to this class, each of which more properly belongs to one of the three other classes. The first order of this third class, marcores, a wasting of the whole body, might fall under the first class, inasmuch as it embraces tabes mesenterica, of which hectic fever is a striking feature; or it might as properly come under the fourth class, (locales,) inasmuch as it is a disease of the mesenteric glands. Next comes intumescentiæ as the second order, which is defined as an external tumour of the whole or greatest part of the body; this might come under any one of the three other classes: under the nervous, inasmuch as hydrocephalus, one of its genera, is a disease of the brain or nervous system; or it might be arranged under the first class, inasmuch as it is generally attended with fever whilst the disease is acute; and lastly, it might be said to belong to the fourth class, inasmuch as it has its seat in a particular part of the body. And should not hydrothorax, one of his genera; ascites, another; hydrometra, a third; hydrocele, a fourth,—and so on, which are dropsies of certain organs of the respiratory, digestive, and sexual systems,—fall also under the fourth class?

We will now cursorily turn to the fourth class, or locales. Why should nostalgia, which is a mental affection, operating on the body at large, be thrown into so obscure a class? seeing that not unfrequently it has its primary seat in the nervous system, at the time endowed with a peculiar mobility! Why might it not present itself to be considered under the first class (pyrexiæ), inasmuch as an insidious and slow fever consumes and re-acts on the fevered senses.

I need trespass no longer, Gentlemen, on your patience and good sense; but having advanced enough, I trust, to

prove the fallacy of CULLEN's system, the total want of scientific principle, of lucid arrangement, to guide him in his endeavours to facilitate the study of diseases, it now remains for me to offer the grounds on which I venture to propose a classification of my own as a substitute for CULLEN's, and of every other with which I am acquainted. Having attentively considered the various nosologies that have been presented to the world in different ages, by various authors, some of whom indeed possessed vast talents, together with profound erudition; from the latter, however, little good resulted to medical science and art, from the ill direction given to the former, and never having been able to discover in them any ray of benignant light—any traces of simplicity or natural order to conduct my mind on from step to step, from the development of one truth on to the acquisition of another, of the one next in alliance by necessary consequence and easy transition; seeing in them nothing but confusion, the judgment perplexed, and the memory incumbered, I gave up the task of referring to them for general principles, and merely from time to time turned to their works, to acquire those accurate definitions of individual diseases with which many of them abounded; seeking in my own mind, and depending on the legitimate prosecution of my professional duties (comparing the history of diseases collected by myself, with the post-mortem appearances of my patients, whenever examination of their bodies could be effected) for that which none offered to supply me with; being persuaded that one of the leading features and chief beauties in the circle of science, as respects true scientific proceeding, consisted in strict legitimate induction from just and extensive premises, by which the ascertaining of one primitive fact prepares the mind, as it were by anticipation, for the acquisition of the one next in relation or natural order of succession, in the course of inquiry, as link succeeds link in a great chain.

In every science and art, as well as in morals, to commence on a false principle is to entail error on every subsequent step and effort. To commence on legitimate grounds—to commence at the proper point, at the beginning of a subject—is at once to achieve half, and to facilitate the progress and completion of victory. Proceeding under such circumstances, is easy and encouraging, because it is natural and fruitful of reward. The intellect no sooner grasps one primitive truth, than the way is paved—the mind prepared, for the disengagement of another, and of subsequent ones, to the final consummation of our views, and the establishment of sound and enduring principles. Before we venture to marshal diseases with any hope of success, many various circumstances, respecting the body in health and disease, require to be known; and just and extensive premises, for accurate and legitimate induction, must be afforded. As, first, correct knowledge of what constitutes healthy appearances of parts, which unwearied assiduity in anatomical investigation of numerous subjects only can teach. Secondly, no less accurate acquaintance with what constitutes the healthy action or function of parts, which laborious observation only can unfold to us, exercised on all who are around us in the enjoyment of health. From these sources we derive the standard of healthy organization and function; on this knowledge is the foundation laid for the uprearing of a just pathology, which requires, in the third place, diligent and faithful records to be kept, of all the various circumstances connected with patients who shall have died and been (fourthly) patiently dissected, to the end of comparing the history of the disease with the appearances exhibited on dissection; and this plan of proceeding is indubitably necessary, a *sine qua non*, wherever the disease had been internal or organic. Here ocular demonstration, directed by extensive anatomical knowledge, only can be trusted; without this, proof cannot be afforded that the symptoms recorded bore reference to the disease suspected to have existed, and by this plan of proceeding our knowledge is confirmed or corrected; by this order of proceeding we acquire intimate acquaintance with the signs which denote the lesion or disturbance of individual organs, and of the systems to which they belong; and thus, too, we are brought to know what systems are most closely connected together in sympathetic alliance.

The mind, thus furnished and prepared, becomes entitled to think and to act for itself, borrowing lights and materials from every source around it; and it was by pursuing such a line of conduct that my mind was brought to suggest, to work out, and complete the classification of diseases which I shall now have the honour of showing and explaining to you; enough having been said, in the printed sketch and in this lecture, to prepare your minds for comprehending it in all its bearings. And here let me take opportunity to say, that though I regard it as the only classification which recom-

mends itself by its simplicity, perfect consonance with truth, by pure philosophic arrangement, and by the ready passport which acquaintance with any one part of the subject affords, to every capacity, of becoming intimately acquainted, by necessary consequence, with every other part, to the effect of facilitating the knowledge of disease, without any effort either of teacher or of student; still let it not be for a moment supposed, that what I have done is all that can be done. No! I have but entered on, and sketched the plan, pointing out its perfect applicability to practice, and it can only be perfected by conspiring and multiplied efforts, ably and legitimately directed by all orders of medical men, and these efforts must be directed to establish each disease of each organ in its natural and proper place, and this can only be done by learning what symptoms characterize, or unequivocally denote, certain affections of certain parts, for in these particulars our science is lamentably deficient.

Turning to his own classification: Diseases are marshalled under four general divisions or classes, in this Nosology, according to the extent of diseased action in each subject or patient, and not on any fanciful views of high or low excitement agreeably to the views of BROWN, or of a cachectic habit of body according to CULLEN, or from apprehension of universal preponderance of nervous influence, throughout the whole frame, constituting the essence of disease, as was taught by HOFFMAN and CULLEN onwards to the present day, nor yet on any vague speculation of the existence of two rival powers in the system, the one destructive of life, the other salutary in its operation, emphatically styled by BOERHAAVE the *vis medicatrix naturæ*.

The first is the most important class in the arrangement, as it respects those diseases which, when exercising their powers on the system, bring more or less every function of the body under or dispose it to diseased influence, and under this class rank fevers only, whether idiopathic or sympathetic.

The three great or fundamental systems, viz. the sanguiferous nervous, and absorbent systems afford not less legitimate grounds for the occupation of their position in the second class in the general economy, the diseases belonging to them ranking next to those of the former class in the extent of disturbance or diseased action which they excite in the body, and these diseases may exist originally or by sympathy in one or more of these systems, the organs of which they are composed pervading every part and conspiring to the production of every tissue of the body, and disease, beginning here generally and early, involves one or more of the lesser derived or subordinate systems, in irregular or diseased trains of action, by consent or close sympathetic alliance.

The third class is founded on the same principle as the foregoing, being not less entitled to the rank assigned to it in the scale. It embraces diseases of all those lesser or subordinate systems which, not rising into the second class, are destined to perform certain peculiar offices, or lesser circles in the great or general circle of living actions, and which admit of being interrupted in their usual salutary course without necessarily involving any one or more of the three greater systems in morbid association, though, generally speaking, the one or former cannot long maintain an independent or isolated chain of morbid actions, without propagating a baneful influence to one or more of the latter.

The fourth or last class comprises all those disorders which extend not their sphere of operation beyond the organ or spot in which they arise.

To illustrate my meaning or foregoing remarks more fully, I will adduce one example.

Be kind enough to turn to the fourth class at the bottom of the sketch, or abbreviated plan of my large or complete chart, and read its definition "*Diseases*," &c. Next direct your attention to the fourth order of that class, and you will read "Digestive system." Then glance your eyes to the right, in a straight line, and you will observe the word "stomach;" and connected with it, in the same straight line, you will see the word "*pyrosis*." Now it is well known that pyrosis shall exist for some time, merely as an unpleasant affection of the stomach, without disturbing any of its neighbouring organs, or interrupting the regular process of digestion. Let us next regard it in a more extended light, as having weakened the stomach in its powers of assimilating food; the salivary, the gastric, pancreatic, and intestinal juices, the bile will soon become more or less deficient or vitiated, superinducing *dyspepsia*, bringing the whole of the digestive organs, or system, under disordered action. Thus you have observed the rise of diseased action in an individual organ; now you behold it spreading its evil to its neighbouring primarily associated organs. It has advanced a step higher; it is now to be seen rated in the class directly above,

in the third class, the definition of which is "diseases," &c.

Doubtless some organ or organs of the lesser or subordinate systems, which are nearest in sympathetic alliance to the digestive, will become in a certain degree also disturbed sympathetically, *e. g.* the urinary, as will be evinced by the deposition of uric acid, or by a suspension of the secretion of those salts which it is salutary for the body to have secreted and expelled by that emunctory. These changes in the digestive system may advance for some time without forcing any one of the three creative or fundamental systems into aberration from healthy action, and as long as these latter shall remain unmoved or undisordered, the disease can never mount up into the class above it, and consequently not into the first and most important class. But we will still further pursue the progress of this disease, and trace its extension to the fundamental systems, pressing them into its baneful service, through the inveteracy of the complaint, the bad conduct of the patient, or unskilful management of the physician, we shall find the heart and arteries vibrating with unwonted violence, the nervous system beset with a distressing train of evils, and the absorbent, obstructed in the process of chylification and nutrition, now actively carrying on the work of destruction, manifested by the speedy presence of emaciation. Refer now to the definition of the second class, and you will find that it embraces "diseases," &c. Observe the third order, "Nervous system," and its second genus, "Hypochondriasis." Let us advance and show its final development. Every function of the body will now be thrown, more or less, out of its wonted course, planting the disease in the highest or most important class of disturbed actions, and this class will be found to bear reference to those diseases which more or less disorder every function of the body, and no other diseases can be said so universally to act as fevers; and thus we behold disease, having commenced at one point, extending itself generally to the remotest ramifications of the body.

The advantage of such a classification as is now offered to the public is confessedly that which CULLEN's cannot supply;—*a class and order for every genus, or classes and orders for every stage of disease.*

I will now select those genera of CULLEN's on which I have ventured to pass strictures, and, by putting them to the test of experiment, prove how easily they can find their place in my classification. Let us begin with odontalgia, or toothache, ranging under CULLEN's first class, pyrexiæ. This disease is originally planted in one of the organs of the digestive system in the teeth, and as long as the evil is confined thereto, however, agonizing the pain may be, it cannot be considered in any other light than as an affection of an individual part, falling aptly into the fourth class, which has respect to individual organs; but if it impair the digestive process by its severity, or the length of its duration, it then glides into the class above, into the third, which has respect to the subordinate systems; and if it yet further propagates its morbid influence to either of the three great systems, it mounts still higher, and fixes itself in the second class, which has reference to the three fundamental systems, and should such be the irritability or excitability of the body, and such the exciting power of the malady, as to engender universal contusion, it assumes the most threatening character, planting itself in the first class. In the same way diabetes may be traced, propagating diseased action from the kidneys to the whole body, involving those organs in destruction; so may asthma, as it is vulgarly called, arising from obliterated air cells, or hepatized lungs, or thickened membrane, or obstructing adhesive mucous or spasmodic action, infecting through the circulating medium, through badly purified or arterialised blood, from time to time, every function remote or near to its seat. But one may say, why put diabetes under the head urinary system? seeing that it is a matter of dispute amongst pathologists whether the disease be originally in the perspirable system; or in the digestive, according to another; or in the absorbent, as a third will have it. To all which I answer, though the true nature of the disease be unknown to us, though suspended or diseased action of the perspirable apparatus may give the first morbid impulse to preternaturally and constantly excited kidneys, augmenting the quantity and perverting the quality of the urine, (an hypothesis not readily assented to as regards the latter condition,) a theory just, however, as respects the former; again, though vitiated or impaired assimilating power, on the part of the digestive functions, may originally dispose the urinary system to take on this diseased action, (a problem difficult of solution;) again, though the inundating rapidity of absorption, pressing absorbed particles on the kidneys, may stamp on those organs the peculiar features of the disease, (another speculative opinion hard to be conceived,) still

for practical purposes, as the more prominent characteristic phenomena reside in this the urinary system, this very system has the first claim to its allegiance, for the disease is only to be recognized by the superabundance or saccharine flavour of the secretion. In nostalgia, as the main or striking feature is anxiety of mind, so we cannot do wrong, nor mislead, in placing it under the system ostensibly affected by the disease, viz. the nervous; though some degree of indigestion generally precedes or predisposes to this morbid moral tone; but it may arise, and often certainly does, in the zenith of health, in a moment, from some peculiar endearing or painful associations about home.

Chlorosis.—This is a disease of too puzzling and protiform an appearance to admit of having its rightplace assigned to it in any classification; indeed I doubt the propriety of the term altogether, the sexual system being often but secondarily or sympathetically affected. Amenorrhœa may exist, as a disease of the sexual system, as the first link to that general disturbance of functions denominated chlorotic; but, on the other hand, in this disease, the more distressing and formidable symptoms of general complaint, of a broken constitution, may have marked out the unhappy sufferer as their destined prey before our attention shall have been arrested bythe suspension of thisfunction, before there shall have been any reason for directing our attention to that organ.

It has happened that extreme languor felt, and visibly expressed in feature and action; sallowness, as connected with want of just assimilating power; palidness, as arising from blood insufficiently depurated or florid; inexpressible depression of spirits, as but one of a train of distressing nervous evils, occurring before the establishment of impaired or vitiated action of the uterus, have all been observed after death to have emanated from palpably diseased heart, arteries, liver, mysentery, lungs, &c. &c., the uterus and other sexual organs remaining unimplicated in diseased appearance. Hydrophobia—this is a disease of so peculiar and subtle a nature as to have evaded the inquiry of medical men respecting its nature, or the more immediate seat of its noxious power. The more prominent phenomena, however, those which designate or characterise the existence of the complaint emanating from the nervous and muscular systems especially, evinced by dread, and a train of other mental evils, and by spasmodic or convulsive motions, on the application of certain stimuli, point out the utility of ranging it first under the one muscular, and, as it advances, under the other, or nervous. The less obvious phenomena are detected after death under the character of diffused and no doubt specific inflammation of the viscera, or of their investing membranes. And, by the way, if the assertion prove correct, that the sublingual glands are uniformly affected, are the seat of the virus, and that to promote a critical discharge thence is to effect a cure, no difficulty would arise in arranging the disease, at its first onset, under the last or fourth class, as a disease of an organ of the digestive system. Chronic syphilis, scorbutus, fungus hæmatodes, cancer, &c. diseases of which, in our present low state of accurate observation, we profess to know little about, do not come to be ranged under any class in my nosology, no more than inflammation in general, for this obvious reason—every part of the body may be the seat of their attack, with this difference, that one prefers the harder, a second and a third the softer, whilst a fourth will rather select the glandular parts of the body as their respective fields of action. The generic or characteristic symptoms, however, of each are pretty clearly defined, as much so nearly as those of inflammation, and will be found intermingled with or modified by the local, functional, or organic phenomena, emanating from respective seats or individual organs affected. Each of those specific diseases will come to be considered individually, as early as we shall have concluded our observations on the 28 different sequelæ or effects of inflammation, which I have been able to establish through legitimate induction, though, as schoolmen and books would tell you, there are but four. Every disease, in Cullen's arrangement not specified clearly, admits of a ready and uniform collocation according to the extent or limits of its ravages.

From the examples that have just now been cited, the necessity will be clearly seen of directing the mind of the student to the exercise of minute investigation, with the view of ascertaining the peculiar texture of the body in which diseased action arose, thence diverging propagated itself to distant organs and systems, to the end of applying our efforts with every possible credit to ourselves and advantage to our patients. (Great appl ause.

REVIEWS FROM THE WEST.

"*Description of the Fossil Deer of Ireland, (cervus megaurus) in the Museum of the Royal Dublin Society.*" By John Hart, Surgeon.

"Insulam cervorum venatu insignem."—Bede.

We should be unworthy of the name of Western Critics, did we not welcome this splendid ornament of our bogs from its lowly dwelling to its new habitation in the Museum of the Royal Dublin Society. It is, indeed, a magnificent skeleton; majestic even in ruin, and creditable to the land of its nativity; looking down seemingly with contempt on the petty curiosities, such as stuffed birds, bottled snakes, and Eastern idols, which make up a display around this august representative of an extinct race and the royalty of its species. What would not the spectator of so sublime a relic give to see it bound once more upon its native hills, clothed with flesh, and endued with its pristine vigour and beauty? only imagine what a spectacle! Six feet six inches in height, ten feet ten in length; the loftiness of the cameleopard, the graceful agility peculiar to its own species, combined with the fine proportions of the horse, and surmounted by such a diadem of horns, that, like an oak twined in a rock, extend their protecting branches on either side of its massy forehead to the distance of nearly six feet! Would not such a living wonder be better worth seeing than all the snarling, hissing, "cribbed and cabined" in, raggamuffins of an African or an Asiatic menagerie? And there is the chase of such an animal, pursued too by Irish wolf-dogs in the glen of the downs, suppose, with Mr. Crampton at their head, (provided the two Dicks of Bow-street, Martin and Birnie, were not at hand to interrupt the sport,) amid the sounding of bugles, the yell of hounds, and mountain echoes—what an association of rapturous ideas does the contemplation of these few bones inspire. Go, Mr. Crampton, and all ye petty pursuers of foxes and hares, and, at the sight of such lordly game, learn the meritorious deeds of your ancestors. And then if we only look to the more substantial side of the picture—the feast; Oh! ye gourmands of modern days, let not your "too solid gums dissolve into saliva" at the mere idea of such a haunch of venison—

> "A picture for painters to study,
> The fat was so white, the lean was so ruddy."

But the praises of such delicious food we must leave to some fitter minstrel. We shall, therefore, content ourselves with recording the little that is known of this once beautiful animal, and the history of its resurrection, an account of which has been lately published in a tract by Mr. Hart of Dublin; but the importance of such an acquisition to organic remains should secure it a more diffused notoriety than the circulation of such a work is calculated to afford.

The particulars of the discovery may be summed up in a few words. Some men had been working in a valley consisting of about twenty acres, when a quantity of bones, which turned out to be the remains of the animal of which we are speaking, was found on a bed of blue clay, covered by strata of peat and shell marl. Upon the representation of this circumstance to the Dublin Society, Mr. Hart was commissioned to proceed to the place, in order to make a selection of the bones to complete a skeleton, which he has done in a very workman-like manner. It is the only perfect one of the kind we believe in existence.

Such are the facts of the discovery and completion of this skeleton; but curiosity is seldom content with meagre details,

and if uncertainty be an encouragement to speculate, never was there a better subject than the present for the exercise of ingenuity, or a finer opportunity to appear learned at a trifling expense. It is indeed impossible to stand over the pit from whence such a treasure is rescued and not ask the question, how, or when, it was deposited there? When a voice, as if from the tomb of all such remains, will answer, "go, read Cuvier." Well, what then, suppose you do so, will you be a degree wiser than before? We fear not; the speculations which such curiosities excite are amongst the least satisfactory in which the human mind can indulge. Nothing, at least, can better prove the uncertainty in which these subjects are involved than the contradictory theories promulged by each succeeding cosmological architect. Though this idea of deducing geological inferences from the state and order in which fossil remains are detected claims the gigantic genius of CUVIER for its parent, our objection will hold valid, for it must be confessed, with regret, that his vast labours on this head have only terminated in plausible conjecture. Hear the great oracle himself:—

"With Dolomin I believe, that if there is any circumstance thoroughly established in geology, it is that the surface of our globe has been subjected to a great and sudden revolution, the epoch of which cannot be dated farther back than five or six thousand years ago; that this revolution had buried all the countries which were before inhabited by men and by animals that are now best known; that the same revolution laid dry the bed of the last ocean, which now forms all the countries at present inhabited; that the small number of individuals of men and of animals that escaped from the effects of that great revolution have since propagated and spread over the lands thus newly laid dry."

Giants are only to be stabbed in their sleep—CUVIER is only assailable when he nods; "Quandoque dormitat bonus Homerus." Is this summary of this incomparable philosopher's geological creed satisfactory? Valleys and mountains exchanged places like the figurantes of an opera! What to-day was the habitable earth, the returning sun looked down upon as the depths of the ocean! One would think that by such a revolution every vestige of terrestrial life would have been obliterated, and instead of daily discovering their remains, the original tenants of the first ocean should be now exhumated by our excavations.

In reviewing the labours of this philosopher on this particular point, such perhaps as no other man could have performed; in ascending the chain of his best constructed arguments, there is a vanity, a visionary halo, encompassing the airy fabric of deductions to which they lead, on which no mind, untinctured with enthusiasm, or the mania of world-making, can repose with confidence. Not a fact has he recorded that has not its fellow; not an argument without its antagonist; not a note on his geological scale (which, like the lyre of Orpheus, would seem to possess sovereign power over the creation) that has not its natural counterpoint. Instead, then, of attempting to solve the great geological enigma by the light of CUVIER, or amusing our readers with a profound guess at the manner in which these animals have become the inmates of our bogs, let us see what is known, or rather what is unknown, about their remains. It is in vain we turn to Irish antiquarians, who seem fertile on every other subject in proportion to its sterility. The regal costume of the country they have described to a nicety. The number of strings to the first Irish harp admits of no doubt; that a race of milk-white horses peculiar to the island were paraded in purple and silver reins, to swell the pomp of a papal pageant; that the Irish wolf dogs were exhibited to the astonished Romans at the Cercensian games; that our goshawks

were once the pride of foreign princes; that bishops bandied presents of the river Ban pearls; and that the choicest ambergris once floated round the islands of Arran; all these, and many more wonderful things, they have told us, which gladden the heart of every Irishman, because, having nothing to dwell on at present but misery, he finds a pleasure in contemplating the vague glories of the past; but on the subject of the great deer they are all silent. Even the inventive tongue of tradition is silent as to the epoch of the existence, as well as the catastrophe in which these animals were destroyed. In the legends of the country too, many of which are of very ancient date, no mention whatever is made of these animals. It is certain, however, that their horns were presented to the two Charleses of England. In the history of Westmeath, written in 1682, by Sir John Piers, a native of that county, and preserved in the manuscript department of the library of Trinity College, the following account of the transaction occurs: "They were then (the horns) the wonder of those halcyon days, and the talk of not only those who had, as well as those who had not, seen them; insomuch, that the report of them being carried to the Court of England, his Majesty was very desirous to see them, and sent his command in writing to Mr. Nugent, of Colamber, to bring them to him. Nugent obeyed, and went in person, and presented them some time before the late unhappy contest that arose between his Majesty and his Parliament; for which his Majesty rewarded him with a concordatum of five hundred pounds." This is probably the first authentic or written record which notices these horns as a subject of public curiosity, a statement which we the more willingly publish, it having escaped the scrutiny of those who have written on the subject. Since that period, they have been found in almost every county in the island, so that we may conclude that they must at some period have been the living ornaments of its fields. But whether they were the sole proprietors of the soil, or shared its fertility with contemporary men; or whether they became extinct from human persecution, or the breath of an epidemic murrain, (questions which have been warmly contested,) we must leave to the sagacity of Mr. Hart to determine. Sure we are, that all such speculations will terminate in a coroner's verdict, "Death by accidental drowning, or some other uncommon cause." One thing only we can be certain of, that such animals existed, from their visible remains: in all other respects, we are circumstanced like the historians of Empedocles, who argued that the wayward youth found a grave in the bowels of Ætna, from finding his brazen sandals on the verge of the mount.

Caution to Psalm Singers.

Dr. Blundell, adverting, in his physiological lecture on Monday last, to the comparative anatomy of the maxillary joint in predaceous, and herbivorous animals, observed, in this respect, that man resembled the herbivorous class; but there was a greater extent of motion in the human jaw, and consequently a greater liability to dislocation. The learned lecturer mentioned a curious case in illustration of this fact. A devout person, of the Wesleyan persuasion, lifting up his voice in a hymn to its highest pitch, brought the condyloid process to the very edge of the glenoid cavity, and, attempting a shake at this critical moment, actually dislocated his jaw. We hasten to give publicity to this fact, that psalm-singers may not in future attempt to shake with their condyloid processes at the edge of their glenoid cavities. We may add too, that although psalm-singing is unquestionably one of the purposes for which jaws were given to man, yet their peculiar structure renders it doubtful whether the great Author of nature would not prefer a more moderate exercise of this function, than devout vocalists are wont to indulge in.

FOREIGN DEPARTMENT.

ANALYSIS OF FOREIGN MEDICAL JOURNALS.

Bite of the Tarantula.

Every body knows that the Tarantula is a species of spider, which is found in Italy, and especially in the neighbourhood of Tarentum, from which place it derives its name. All sorts of fables have been invented with regard to the effects of the bite of this insect; these marvels, however, have disappeared, and, as it usually happens in such cases, a transition has taken place from the most extravagant credulity to an entire disbelief of all that has been related on this subject. It is no longer believed that the bite of the tarantula is followed by the slightest inconvenience. The following case, however, which is given by Doctor Francesco Mazzolani of Naples, in the *Osservatore Medico*, seems to be opposed to the prevailing incredulity.

Giovanna Battista Petrini, a young Tuscan, about 15 years old, having slept in the open fields, as is the custom with the reapers at harvest time, was awakened at an early hour in the morning by a sharp bite which he felt on the second toe of the left foot. His comrades, whom his cries had brought to the spot, found a large tarantula in the great coat in which he had wrapped himself. There could be no doubt, therefore, that he had been bitten by this insect, and they accordingly brought the young man to the town, and immediately sent for me. I found the toe which had been bitten very much inflamed. The patient was in great agitation, suffering convulsions and subsultus in all his limbs; the penis was erect, and the abdominal muscles in such a state of contraction and rigidity that they might have been aptly compared to a piece of leather. There was a cold sweat on the surface of his body; tongue moist; countenance expressive of terror; an irresistible tendency to sleep, and complete prostration of strength. The patient complained of great heat in his inside, and of a burning thirst; he begged earnestly for some cold water, to quench, as he expressed it, the fire which was consuming him. After an attentive examination of these symptoms, I had no hesitation in considering them as indicative of a state of general debility. The beat of the surface and the continual thirst of the patient did not alter my view of the case, for I thought these symptoms might be classed among those fallacious sensations which are frequently observed in certain diseases. Under this persuasion I immediately adopted a stimulating method of treatment. I accordingly prescribed a clyster composed of 10 ounces of the decoction of bark, half a drachm of camphor, and a scruple of laudanum, to be administered three times a day, a drachm of theriaca divided into six bolusses to be taken immediately after; for his ordinary drink good wine of Orvieto, and lastly, frictions with volatile liniment on the wounded toe. The symptoms continued unabated during the day, but the next morning I no longer observed that strong tendency to sleep which had appeared on the preceding day, and the superior extremities had resumed more of their natural warmth. The other symptoms remained the same. I repeated the same remedies, augmenting the dose of theriaca to a drachm and a half, and the next day to two drachms. By continuing this treatment for five days, the somnolency and the tension of the abdomen gradually disappeared, and the patient recovered his ordinary state of health.

To this case M. Magliari, the editor of the *Osservatore Medico*, subjoins the following sensible observations. "There was a time," he says, when "physicians believed that the bite of the tarantula destroyed sensation and life, and that the only remedies which could avert this fatal result were music and dancing. It was religiously believed at that time, that persons bitten by this insect evinced an invincible aversion to the colours of black and blue, while at the same time they manifested a decided predilection for white, red, and green. There were some who even went so far as to affirm that they had seen tarantulas dance in cadence to the patients, and there was no sort of absurdity broached by the people on this subject for which physiologists did not attempt to account. Mead thought the poison acted directly on the blood, Geoffrey on the nerves, and both these physicians, as well as Grube and Shuchzer, were only followers, in this respect, of the celebrated Baglivi, who was a zealous supporter of these errors. The extravagance of the imposture operated as a cure for credulity. The courage of Doctor Sanginetti, who

caused himself to be bitten by tarantulas at the hottest period of the summer, without experiencing any serious inconvenience, and the excellent work of SERAO completely destroyed the romances to which physicians of the highest reputation had for three centuries given credit; and the malady was regarded only as a sort of hypochondriacal affection, to which the reapers are subject under the burning influence of the sun, in the vicinity of Tarentum. This last opinion which is now generally adopted, does not seem to accord with the case given by Dr. MAZZOLANI, and the attention of physicians, who have opportunities of observing the effects of the bite of the tarantula may still be profitably directed to this subject."

Bite of a Mad Animal, followed by the appearance of sublingual pustules. Case communicated by Dr. BAUP, *of Nion, in Switzerland.*

A man aged 60 years, of a good constitution, was bitten on the right hand, on the 7th of September 1824, at seven o'clock, in the evening, by a dog supposed to be mad. Immediately after he was bitten, he made water on the wounds, and walked towards the nearest village, which was not far from the spot where the dog assailed him. At this place the wounds were washed with vinegar in which some common salt had been dissolved, and afterwards cauterised with a stocking needle heated at the flame of a candle.

The same night at 11 o'clock, the patient came to me. There were five bites on the hand; one of them a superficial wound on the palm, and the others on the back of the hand; the most extensive was a transverse wound, four lines long, and two deep, penetrating the cellular tissue, and the exterior tendon of the middle finger.

The cauterization performed in the village had been so slight that I scarcely observed any trace of it, and uncertain as to the state of the dog, I had no hesitation in employing the means usually adopted in cases of wounds inflicted by mad animals.

I first washed the parts well, I then cauterized them with the chlorate of liquid antimony; I also recommended friction with a liniment composed of oil and caustic ammonia, with a view of removing any saliva which might have escaped the simple lotions. I prescribed a mild regimen, and abstinence from wine. The patient slept well, and suffered no inconvenience from the operation.

The scars produced by the caustic became very large, and the hand swelled considerably. They were not painful, however, and the patient had scarcely any fever. They were treated by emollient applications. On the 1st of October they came away, and left wounds, of which the suppuration was kept up during 40 days, in conformity with the principles laid down by the best authors. During all this time the man enjoyed perfect health, followed his ordinary occupations, and had not the slightest uneasiness as to the future consequences of the bites. I subsequently ascertained, by the most irresistible evidence, that the dog was mad, and having read M. MAROCHETTI's article, I examined every morning and evening the inferior surface of the patient's tongue. On the 18th of September, at 10 o'clock in the morning, there was no vesicle, and the man was in good health; but on the evening of that day, I observed on each side of the bridle a moveable semi-transparent vesicle, of the size of a pea, red in colour, and having a manifest fluctuation. I immediately cauterized them with a large needle, heated to a white heat. I directed the patient to gargle the part with the decoction of genista, of which he continued the use for nearly a month after the complete cicatrization of the little sores, which remained after the separation of the scars. The patient had no symptom indicating the eruption of sublingual pustules.

On the 10th of December, the sores resulting from the cauterization of these vesicles had completely healed, and no symptom of hydrophobia had appeared.

The discovery of sublingual pustules in hydrophobia, announced by Dr. MAROCHETTI, seems daily to acquire fresh confirmation. A member of the Royal Academy of Medicine announced in a late sitting, that he had to communicate a case in which these pustules had been observed. The case detailed by M. BAUP seems to leave no doubt of their existence. The substance of Dr. MAROCHETTI's observations, (which we were the first to communicate to the public,) is to this effect. He thinks the hydrophobic virus, after remaining some time in the wound, fixes itself under the tongue, at the orifices of the ducts of the sub-maxillary gland, which are situated on the sides of the frænum; that a peculiar inflammation there developes itself, which produces the little pustules containing a fluctuating liquid, which he believes to be the hydrophobic virus. The period at

which these pustules appear, is generally *between the third and ninth day after the bite.* If they are not opened within three or four days after their appearance, the virus is absorbed, and the patient lost without resource. For this reason, Dr. MAROCHETTI advises the examination of the tongue immediately after the bite, and this examination to be continued during six weeks, the patient drinking every day a pound and a half of the decoction of genista, or taking a drachm of it in powder four times a day. If during this time the pustules do not form, the patient may be considered out of danger; but as soon as they appear, they must be opened and cauterized immediately, the patient gargling the part with the above mentioned decoction.

If these observations continue to receive confirmation, they must be considered indisputable, however extraordinary or inexplicable they may at the first view appear. It must be observed, however, that most diseases arising from virus, or miasma, have a specific character, or certain *elective* property, by which they affect specifically particular tissues, organs, or processes. Thus in typhus, the part on which the miasma fixes is the brain; in yellow fever, the stomach and the biliary ducts; in the plagne, the glands and the skin; the amygdalæ in scarlatina; the lymphatic system in syphilis, &c. According to this theory, the pustules of hydrophobia, if their existence is once established, would prove that the sublingnal glands are the spot on which the virus of rabies fixes itself, a conclusion which agrees entirely with all the facts known as to the existence of this virus exclusively in the saliva of mad animals.

It is necessary to observe, that many persons who object that they have not met with these sublingnal pustules in animals that have died of rabies, have only examined these animals after death. At that time the pustules certainly are not to be met with, but this does not prove that they have not existed, and the question cannot be affected by any cases in which a constant inspection of the tongue has not preceded the paroxysms of madness.—*Gazette de Santé, Aug.*

REVUE MEDICALE—AUGUST.

At the sitting of the 27th of June, a letter addressed to the President by M. ZUGENBAHLER was read, in which that individual acquainted the Academy that ten years ago he maintained a thesis on the subject, which now occupies the attention of Mr. BARRY, an English physician, who lately read to the Institute a memoir on the circulation of the blood in the veins. Mr. BARRY maintains that a vacuum is made in the thorax, while it dilates; M. ZUGENBAHLER, on the other hand, contends that the vacuum is made in the heart. The writer of the letter adds that he did not write it with a view of disputing the priority of Mr. BARRY's claims, but to request the Academy to pronounce its judgment on a dissertation which he published in 1815, entitled *De motu sanguinis per venas.* This dissertation, written in Latin, is annexed to the letter; the author maintains, as the experiments of Mr. BARRY tend to prove, that the circulation of the blood in the veins is subjected to the pressure of the atmosphere, the place where the vacuum is made remaining to be proved. The commissioners appointed to examine the memoir of Mr. BARRY were also instructed to report on the work of M. ZUGENBAHLER.

ROYAL ACADEMY OF MEDICINE.

At the sitting on the 14th of June, M. FRANCOIS read a memoir on the tridace, or juice extracted from the garden lettuce, at the time when it is in blossom. (*Lactuca sativa hortensis.*)

General Dropsy and Dyspnœa attending Pregnancy.

This was a case read by Dr. BOURGEOISE. The woman who was the subject of it began, towards the seventh month of her pregnancy, to experience dyspnœa, which soon increased to such a degree that she was unable to lie down or sleep from the constant sensation of suffocation. At the same time the symptoms of dropsy appeared; her face was swelled, and her limbs affected with œdema. Bleeding from time to time was resorted to; the delivery took place naturally and easily enough, but was followed by peritonitis, which was not cured until a month afterwards.

Stomach pierced by a pin.

M. FERRUS exhibited a stomach, on the great curvature of which, near the pylorus, was found a pin of an inch in length, the point of which came out across the external coat of the viscus. Nothing had occurred during life to cause any suspicion of the presence of this extraneous body, which appeared, however, to have been making its way for some time through the parietes of the organ, and to have penetrated towards the superior part of the œsophagus.

Softening of the Stomach.

The same physician exhibited two cases of this kind, in one of which the alteration was not indicated during life by any remarkable symptom, which renders it doubtful whether this is always the effect of inflammation; the patient was, however, the subject of scurvy; was this disease then the cause of the alteration which took place in the organ?

A Torn Heart.

M. FERRUS also presented a heart, exhibiting on its surface some scorbutic spots, and a tear about an inch in length at the left ventricle, near the point of the organ. At the torn place the substance of the heart appeared altered, and it was evident that the tear took place gradually, and from the internal to the external part of the organ. It was taken from the same scorbutic patient whose stomach was exhibited at this sitting. A short time before his death he had a fall by which three ribs were fractured on each side, and since that time he was subject to a sensation of suffocation and great heat in the region of the heart.

Wound of the Eye.

M. LARREY submitted to the examination of the chirurgical department a soldier, aged 27, who had received a wound in the internal angle of the left eye from an unbuttoned foil, the instrument having passed between the eye and the internal paries of the orbit. The patient had suffered under an imperfect paralysis of the organ, indicated by dilatation of the pupil, immobility of the iris, and an aberration of vision, in consequence of which he could only perceive the circumference of objects. During a month from the time of the accident, stimulants of all kinds had been employed, and a slight degree of motion was beginning to be observed in the pupil.

The MEMORIAL of CHARLES ASTON KEY and BRANSBY COOPER, Esquires, to the Grand Committee of Governors of St. Thomas's Hospital.

Gentlemen,

As it can never have entered into the contemplation of the Committee, that their late sudden change of plan of legislation in regard to the Anatomical and Surgical School should have seriously injured the interests of individuals, we beg respectfully to put the members of the Committee in possession of the following facts, many of which were communicated to your Board through a letter addressed by Mr. Key to one of its members; but we are instructed that it would be more regular to address ourselves to the Committee.

In the year 1792, Sir Astley Cooper was admitted by Mr. Cline, senior, to a share in the anatomical lectures; and a few years after, on payment to him of 1000*l.*, was admitted to a moiety of the Museum. On Mr. Cline's retiring about the year 1810, his son, Mr. Henry Cline, succeeded him; and on his death, Mr. Cline, senior, signed a paper, acknowledging that every article of the agreement between his son and Sir Astley Cooper had been fairly and honourably fulfilled, thereby releasing Sir Astley from all past agreements. Sir Astley Cooper then admitted Mr. Green to half the anatomical lectures, Mr. Cline receiving from Mr. Green 1000*l.* for the moiety of the museum. The collection of preparations when Sir A. Cooper was admitted a partner was very limited. It has since increased two-fold, chiefly by the individual exertions of Sir ASTLEY COOPER. By unremitting labour during a period of 20 years, and at great expense he succeeded in collecting an extensive series of morbid preparations; and when the present theatre was completed in 1814, he brought the whole of his own private collection from his house in Broad-street, and deposited it in the Museum of St. Thomas's Hospital, for the benefit of the united Surgical School of the two Hospitals. Sir ASTLEY COOPER considered that in placing his preparations in the custody of the Governors of St. Thomas's Hospital he was confiding to the best security.

The object of this collection was to illustrate his lectures on surgery, which were established by him in 1792, and continued until 1824, when, without any remuneration, he finally resigned to Mr. Green and Mr. Key the largest surgical class that had ever met in any theatre in London. This course of lectures was quite distinct from those on anatomy; and it should be observed, that with regard to the history of the morbid preparations just referred to, Mr. Green is, for the most part, unacquainted.

We must now refer to the circumstances connected with the late arrangements in order to fully explain the hardship of our situation.

Sir Astley Cooper being confined by illness in the country, and willing to retire from the duties of a lecturer, was desirous that Mr. B. Cooper should be ap-

pointed to succeed him in the anatomical lectures.

It had been an invariable practice for the lecturers to select a proper person, and when it was ascertained by his officiating as a lecturer, that he was likely to support the reputation of the School, a recommendation was forwarded to the Committee, who never had failed to confirm the appointment. It was thus in the case of Sir A. Cooper. Mr. Henry Cline, Mr. Green, and Mr. Key, who had all lectured long before their appointment by the Committee; and such has been the practice in other hospitals.

Mr. B. Cooper went to Sir A. Cooper, (who was at that time in the country,) by the recommendation of Mr. Green, to advise him at once to send in his resignation; but Sir A. Cooper wrote to Mr. Green, saying he would not resign the lectureship, but upon condition that his share of the Museum should become the property of his nephews, Mr. B. Cooper and Mr. Key; to which Mr. Green readily acceded. Of Mr. Green's friendship Mr. Bransby Cooper could have no doubt, from the strong terms in which he expressed himself, both verbally and by letter, on this subject. Sir Astley Cooper having received an assurance from Mr. Green, that he agreed to Sir A. Cooper's disposal of his Museum to his nephews, and relying on the faith of Mr. Green's promise, that Mr. B. Cooper should have his cordial support in obtaining the appointment, sent in his resignation, recommending his nephew as his successor.

Sir A. Cooper, finding that there were difficulties as to the appointment of his nephew, though he had already been tried and approved as an anatomical lecturer, immediately recalled his resignation; but was informed, through the treasurer, that it was too late, as he had given away the situation.

This arrangement depriving Sir Astley Cooper and his nephew of the use of the preparations deposited in the Museum at St. Thomas's, and wishing them to form part of a public collection, they agreed to present the preparations to Guy's Hospital, where they could have the full benefit of them. And as Mr. Key had no longer the means of illustrating his surgical lectures, he had no alternative but that of resigning at St. Thomas's, and accepting the office of Lecturer on Surgery at Guy's.

These are the facts, and we shall only trouble you with a few comments upon them.

It will not be affirming too much to say, that a large share of the success of the surgical school is to be attributed to Sir A. Cooper's enterprising spirit and unwearied exertions; and in a firm reliance on the good faith of the gentlemen who govern your Institution, he deposited within your walls the fruits of his labours, for the benefit of the united Surgical School of the two Hospitals.

It may be remarked, that the only person who has derived any pecuniary advantage from the transfer of the property, is Mr. Cline, who has received 2000*l.* for a Museum, the most valuable part of which was added by Sir A. Cooper. It is quite clear that Sir A. Cooper did not, in any part of these transactions, look to any pecuniary remuneration; for he gave half of the Anatomical Lectures to Mr. Green; he gave 1000*l.* towards building the Theatre; he gave the Surgical Lectures, which he had himself established, to Mr. Green and Mr. Key; and he gave his moiety of the Museum to Mr. Key and Mr. B. Cooper, with the perfect consent of Mr. Green.

It cannot be conceived that Mr. Green, having agreed to a new arrangement in the disposal of Sir A. Cooper's share of the Museum (on the faith of which Sir A. Cooper resigned), and having recommended his resignation, could have intended to avail himself of the previous agreement, which provided that 1000*l.* should be paid to Sir A. Cooper on his retiring. And we presume that the Committee, in having for the first time regulated the succession of Lecturers, could not have contemplated that the arrangement would have furnished Mr. Green with a plea for refusing to fulfil his agreement, and for laying claim to the whole of the Museum, and thus appropriating to himself the labours of Sir A. Cooper's life. Will the Committee permit the property of an old and faithful servant for thirty-three years to be thus detained within their walls?

We only claim the preparations of Sir A. Cooper, made with his own hands, at his own expence and under his own roof. We are willing to forego all benefit from the original museum for which he paid Mr. Cline 1000*l., and from the* 1000*l. he presented to the Treasurer and Governors of St. Thomas's Hospital, towards the erection of the Anatomical Theatre.*

Thus, Gentlemen, you will observe that one of us an appointed lecturer, and the other an approved probationer in the United Surgical School, are deprived of every advantage to be derived from the use of the property of our relation Sir Astley Cooper, from which we are entitled to consider an income might be obtained. Relying upon your justice we commit our case into your hands, trusting

that you will interfere, and protect us from the consequences of your sudden and previously undeclared determination to discontinue the joint arrangements of the anatomical school of the two hospitals. We trust we have not stated any thing which can be considered in any way disrespectful to the committee. If we have erred, it is wholly unintentional. We are with every sentiment of respect,

Your most obedient servants,
CHARLES ASTON KEY,
BRANSBY COOPER.

MEDICAL SOCIETY OF LONDON.

On Monday evening last there was a very numerous attendance of the members of this Society. Dr. CLUTTERBUCK in the chair.

After the Minutes of the preceding meeting had been read; the case* of the poor woman on whom the operation of transfusion was performed was brought before the society in a paper written by Mr. DOUBLEDAY.

This excited a very interesting discussion, which is adjourned to next Monday evening. We understand Dr. BLUNDELL will be present.

The great majority of those who spoke on the occasion were decidedly of opinion that the recovery of the woman was not attributable to the operation. The arguments made use of in support of this opinion were the following:—

1st. The operation was not performed until six hours after the hæmorrhage had ceased; the probability was, therefore, that she would have survived without the operation.

2d. During the period between the cessation of the flooding and the operation, stimuli of various kinds had been administered. She had taken *twenty ounces* of brandy, 160 drops of tincture of opium, ammonia, three eggs, beef tea, gruel, &c. Her recovery might be attributed to these. The opinion of Mr. C. CLARK was brought forward. In his lectures he says that no woman will die from uterine hæmorrhage, if bread and milk and ammonia are administered freely.

3d. It was argued that the change for the better was too immediate to be attributed to the operation. The injection of the whole 14 ounces of blood did not occupy above ten minutes; yet when two ounces had been thrown in, Mr. DOUBLEDAY said that the countenance was improved; when four ounces had been injected, her pulse was broader, and she opened and shut her eyes with more force; at the end of the sixth ounce she said she was as strong as a bull. Now it was urged that the quantity of blood injected was not sufficient to explain the improvement of the patient.

4th. Previous to Mr. DOUBLEDAY performing the operation, Dr. BLUNDELL was called in, and he attempted to perform transfusion, the woman, however, resisted so powerfully, that the attempt was given up. If the patient was so powerful as to successfully resist Dr. B.'s attempt, the operation was needless.

To these objections it was replied:—

1. That although six hours had elapsed between the hæmorrhage and the operation, yet at the time it was performed the woman appeared sinking; and that in those cases of uterine hæmorrhage which terminated fatally, some hours always elapsed between the cessation of the hæmorrhage and the death of the patient; in two cases that were mentioned, the period was in one *three*, in the other *ten* hours.

2d. The recovery of the patient could not be attributed to the stimuli given: for these only produced a temporary effect. After each dose of brandy the pulse rose but again sunk in a few minutes. That these measures were persevered in for a sufficient time, and that they were administered in sufficient quantities to give them a fair trial, yet the woman was sinking, and it was the opinion both of Dr. BLUNDELL and Mr. DOUBLEDAY that she could not survive without the operation.

3. That the change for the better was not attributable to any other cause than transfusion; and that it was not too immediate to be ascribed to the operation. No very decided good effects were observed until six ounces were injected. Every other means had been tried without success.

4. As to the apparent strength which the woman exhibited when Dr. BLUNDELL attempted the operation; such a state was always observed in cases of uterine hæmorrhage which terminated fatally. In one case, mentioned by Mr. DOUBLEDAY, it required several persons to confine the patient in bed, yet this woman died from flooding.

Such were the arguments, *pro* and *con*, in this case.

Mr. LLOYD said, that transfusion itself was a most dangerous operation; that it was practised from the years 1660 to

* Reported in last week's number.

1680, both in England and France, with human blood as well as that of other animals; and again, that diseases might be propagated in this manner. So dangerous was transfusion, and to such an extent was it carried in France, that the Government issued an edict forbidding its use.

To this it was replied, that in those cases human blood was not used, but that of other animals, which Dr. BLUNDELL said was injurious. The danger of propagating diseases was not to be compared with that of hæmorrhage.

GUY'S AND ST. THOMAS'S HOSPITALS.

The arrangements at these Hospitals for the present session are so unusually *felicitous*, that the days of old return on our minds, and we almost fancy ourselves to be living in the *seventeenth century*. Sir Kenelm Digby, our contemporary, and the *cure by sympathy*, the cacoethes of the day!

At GUY'S, the stores of *Anatomical knowledge* are to be unlocked by *A Key!* The nature and treatment of *Fractures* and *Leakages* explained by a *Cooper!* and the Structure and Diseases of the Teeth, with the connexion between well regulated Teeth, and the beauty of the "human face divine," illustrated by a celebrated *Belle!* (Bell.)

In the Practice of Medicine, *Disorders of the Intellect* will be *reflected* by *Dr. Bright!* of whom it is not too much to say with the poet,

"Natura lo fece, è poi *ruppe la stampa!*"

It is also anticipated that Clinical Lectures will occasionally be delivered by *Dr. Back*, on *Lumbago* and *Diseases of the Spine!* The *effects* of *Electricity*, and the *Galvanic Battery*, will be displayed by a meritorious but suffering individual, who must often have exclaimed with the Psalmist, "would it were evening! and in the evening, would it were morning?" unlike the protegée of Prospero, his bones are not at *certain periods only*, "filled with cramps and aches," but he is *constantly aching!* (Aikin.)

Finally, to assist such of the Students as may be desirous of prosecuting the study of *Mechanics*, as an Auxiliary Science, a *Mill in town*, (Millington,) *near the Royal Institution*, has been engaged, for the express purpose of exhibiting with perspicuity the *character of complex machinery*, and elucidating the science of Mechanics in general.

ST. THOMAS'S HOSPITAL.—The same *harmonizing* spirit that pervades the establishment at Guy's appears to prevail in an equal degree in the arrangements instituted at this, the Sister Hospital.

It has been insinuated, that the Gentleman lately elevated to the Anatomical Chair is indebted for his promotion to adventitious circumstances; and that, as the *Death* of Naboth was occasioned by his connexion with a *Vineyard*, so this Gentleman owes his *living* to his connexion with a *Wheat-field!* (Whitfield.)

"Credat Judæus Apella;"

It is preposterous! On the first blush there appears not the slightest resemblance between the two cases. *One* is a tale of the *East*; the other, decidedly a story of the *South*.

But to return to the subject: In the Surgical Department, *Gangrene* will be illustrated by *Mr. Joe Green!*

Mr. Tyrrell (a descendant of the gentleman of that name who occasioned the death of William Rufus, by shooting him with an arrow in *the eye*,) will explain the *various modes of operating* on that *tender* and *delicate organ*.

The *herbs* and *plants*, comprised in the *Materia Medica*, will be described by *Dr. Roots!* assisted on *Aquatic Plants* by *Dr. Lush!*

Dr. Locock will unfold the *cause* and *sequelæ of pregnancy*, and *Mr. Burton* explain the different kinds of *fermentation*.

"Cum multis aliis, quæ nunc prescribere longum est."

Δ. E. A.

To the Editor of THE LANCET.

LETTER IV.

SIR,—In my former letter I said that the number of the members of the Corporation of Surgeons, in the year 1797, was only 500, and that 127 (it should have been 178) of these were quite sufficient, at that time, to put a stop to the further monopoly of the Court. According to the list just published, the number of the members at present, is 5803. You will find, Sir, upon a reference to this list and the former one, that there has been an increase of 716 members. The former list is dated the 1st of January, 1823; the latter the 8th of July 1825. Now as each member pays 22*l.* to the College, it will be found upon examination, that, in a little more than two years and a half, there has been received by the College, deducting the price of the stamps, the sum of 15,036*l.* And as five

guineas for each member are divided amongst the Court, it follows that 3750*l.* in that short space of time must have one directly into the pockets of the Examiners!

But is this all? I have not taken into the above calculation the five guineas divided amongst the Examiners, for every one who has been rejected; the guinea to each examiner for being present at the opening and closing of the Court; the fees of apprentices of persons examined for principal and assistant surgeon in any service; of officers who have been examined, touching their wounds or injuries, for certificates of superannuation, &c. &c. The amount of these sums is well known, I suppose, to the Committee of Auditors, who are sworn to maintain the dignities and welfare of the College; in other words, not to tell the tale of mystery.

It is more easy to show what the Court of the College has not done with its enormous revenue, than to point out any one thing which it has done for the advantage of the commonalty. The relation, however, which the Court of Examiners bears to the members at large, leaves them without any excuse for their conduct. In their public capacity they have injured every member who is without the pale of a Metropolitan hospital; and, by their last Bye law, they have done all in their power to shackle our successors. But tyrants are convinced they have carried matters rather too far when they find their victims already in rebellion. The awful words, "We will not have these men to reign over us," are beginning to be heard; and the "*quæ prosunt omnibus artes*" will not be much longer confined to the Court of Examiners.

The history of the now College of Surgeons is but imperfectly understood; and as I have not leisure at present to write a complete one, I shall give such parts of it as are necessary to elucidate my subject, without confining myself to the order of time.

An Act was passed in the 18th year of the reign of King George II., by which the Barbers and Surgeons of London were separated into two distinct Corporations. There are, in this Act, two clauses which I think of importance to transcribe. 1st.—"And it is hereby further enacted by the authority aforesaid, that it shall and may be lawful to and for the said Company or Corporation herein before established and incorporated, from time to time in the manner hereinafter mentioned, to elect, chooe, and appoint one principal Master or Governor, two other Governors or Wardens, ten Examiners of surgeons, and twenty-one persons to be the Court of Assistants of the said Company or Corporation, to be respectively qualified and admitted in such manner, and to continue in the said office respectively, for such time and times respectively, as by the Bye-laws, rules, ordinances, and constitutions of the said Company or Corporation, shall be, from time to time, ordered, directed, provided, and appointed." 2d.—"And it is hereby further enacted, that it shall and may be lawful to and for the Master and Governors of the said Company and Corporation for the time being, or any *two* of them with nine or more of the members of the said Court of Assistants of the same Company for the time being, when and as often as to two of the said Masters and Governors shall seem meet, to hold Courts and Assemblies in order to treat and consult about and concerning the rule, order, state, and government of the said Company or Corporation herein before established and incorporated as aforesaid; and also that it shall and may be lawful to and for the said Master and Governors and Court of Assistants so assembled, or the major part of them, to make, ordain, constitute, establish, ratify, confirm, annul, revoke, or abrogate, from time to time, such Bye-laws, ordinances, rules, and constitutions, as to them shall seem requisite, profitable, and convenient, for the regulation, government, *and advantage of the said Company and Corporation*; so as such Bye-laws, ordinances, rules, and constitutions, be examined, approved of, and allowed, as by the laws and statutes of this realm is provided and required."

A court was held, upon the first Thursday in July, 1796, to elect officers for the ensuing year; but not more than our governor could attend. One was dead; the other was paralytic, and a considerable distance from town. The choice of officers took place however, without the second; and having thereby committed an illegal act, the corporation applied to parliament to obtain a bill of indemnity for the past; to get themselves erected into a College,—and to gain a further extension of their privileges. Lord THURLOW's opinion* seemed to have as much effect upon their bill as the wool-sack from which he spoke would have had if it had fallen from a height upon the Master of the Corporation. But it shall not be said that I have given one side only of the question. I will extract, from his Lordship's speech,

* See my last letter.

what he said of those who petitioned against the Bill. "The petitioners against this Bill have great reason to complain. Their privileges have been violated; and even their property has been invaded. They have been too long trampled under foot; and, however "*grating*" it may be to the ears of "*some people*," they have the strongest title in the world to have their complaints heard with patience and attention."

From this period I do not find any thing more about this Corporation, than that they went on, as before, relying for their authority upon the Act, (the provisions of which they themselves allowed they had not fulfilled,) till the 22d of March, in the 40th year of the reign of the late King. At this time the Charter, from which I copy the following clause, was granted: "And whereas we are informed that the said Corporation of Masters, Governors, and Commonalty of the Art and Science of Surgeons of London, hath become and now is dissolved. And whereas it is of great consequence to the commonweal of this kingdom, that the art and science of surgery should be duly promoted: And whereas it appears to us, that the establishment of a College of Surgeons will be expedient for the due promotion and encouragement of the study and practice of the said art and science; now we, of our special grace and mere motion, and at the humble petition of JAMES EARLE, Esq. the late Master, and divers other members of the aforesaid late Corporation of Surgeons, have willed, ordained, constituted, declared, given, and granted, and by these presents, for us, our heirs, and successors, do will, ordain, constitute, and declare, give and grant unto the aforesaid JAMES EARLE, and unto all the members of the said late Company or Corporation of Master, Governors and Commonalty of the Art and Science of Surgeons of London, having been admitted and approved surgeons within the rules of the said company; and also unto all such persons, who upon, or since, the dissolution of the said Corporation, shall have obtained letters testimonial, under a seal purporting to be the seal of the said late dissolved Corporation authorising them to practise the art and science of surgery; that they, from henceforth for ever hereafter, shall be and remain by virtue of these presents, one body corporate and politic by the name of the Royal College of Surgeons in London, and by the same name shall and may have perpetual succession, and a common seal, with the power to break, alter, and make anew the said seal from time to time, at their will and pleasure; and by the same name shall and may implead, and be impleaded, before all manner of justices in all courts, and in all manner of actions and suits; and shall be, at all times and for ever hereafter, persons able and capable in law to take, purchase, possess, hold and enjoy, and shall and may take, purchase, possess, hold and enjoy, a Hall or Council-house, with its appurtenances, situate within the cities of London or Westminster, or within one mile of either of them, for the use and purposes of the said College; and also any other lands, tenements, rents, and hereditaments, wheresoever situate, lying and being; not exceeding together with the aforesaid Hall or Council-house, and its appurtenances, the yearly value of one thousand pounds in the whole, without incurring any of the penalties in any statute of mortmain, or any thing in any statute of mortmain to the contrary notwithstanding." This Charter confirms all former Acts and Letters Patent. And it is by virtue of this Charter that the members of the Court make what Bye-laws they please. These laws inform us, that any member of the College is at liberty to practise that profession which he shall not have the power to teach! If he be not a hospital surgeon, nor recognised by the College, the 'Council of Ten' will not receive his certificates.

For the present I have done with the text. Mr. ABERNETHY shall furnish the commentary. He, like myself, has "an abhorrence of the dreadful consequences of superstition and bigotry, and of those of tyrannical restriction and oppression;" and "the members of our profession in general are to determine the value of my humble endeavours to promote our professional knowledge and character, and in their decision I am ready respectfully to acquiesce."*

BRUTUS.

To the Editor of THE LANCET.

SIR—Being a Member of the College of Surgeons, I feel as most others do the contempt shown by that petty parliament, and should be truly rejoiced to see the grievance arising from its monopoly and abused power redressed; but I think that no reasonable hope of effecting it can be entertained, unless it be set on foot by some of the members themselves who have a prowess of character founded in

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* Hunterian Oration, 1819.

unborrowed talent, and surely it would not be desirable that we should ever obtain our end, at the expense of our independence, by the interference of any allied power; talking of these affairs, be good enough to allow me to express, through the medium of THE LANCET, all due thanks to Dr. ARMSTRONG for the very handsome compliment he has so publicly paid us in the advertisement of his pamphlet, and especially for the condescension and generosity manifest by his having spent his time (the more valuable at a period when he must have been engaged in finding matter for twenty more lectures) in attempting to inspire us, weak-minded beings, with ability enough that we may hereafter be enabled to conduct our own affairs, and with courage enough to defend our rights. May the Doctor reap all the praises which he deserves for his modesty and disinterestedness, and when the battle is over, and we engaged in building a monument to his honour, it is solicited that the Doctor will further extend his generosity and superintend its erection, in case we silly frogs should, unguided, raise at the same time the monument to our own everlasting ridicule.

I remain, Sir,
Yours, respectfully and obliged,
AN INDEPENDENT MEMBER OF THE COLLEGE.

P. S.—I have sufficient reason to recommend the Members of the College of Surgeons to observe the motto "*cui fidas vide.*"

[We have selected the above letter from upwards of fifty, written in a similar spirit, for the purpose of showing the *feeling* which Dr. ARMSTRONG's Address has called forth amongst the Members of the College. It is alleged by many that Dr. A.'s motives are not of a public, but of a private nature, and this suspicion has chiefly arisen from its being generally known that Mr. BENNETT (whose certificates are refused at the College) is Dr. A.'s particular friend. For ourselves, we must say, we do not believe that Dr. A. has been influenced by any personal considerations, and we therefore give him full credit for the purity of his intentions.

At an early period we will present our readers with a brief notice of Dr. A.'s Address; in the mean time we advise the Members of the College to stand aloof from Mr. BENNETT (a mere exotic) and all other disappointed persons, whose claims to respect and redress have been vitiated by petitioning the College to become participators in the benefits arising from an unjust and infamous law.—EDITOR.]

HOSPITAL REPORTS.

GUY'S HOSPITAL.

Case of true Scirrhus of the Testicle.

The following case of true scirrhous disease of the testicle is at this time in Guy's Hospital, under the care of Mr. KEY.

The patient was admitted on September 28th; he is about 50 years of age, of dark complexion, and somewhat sallow appearance, but with no marked expression of malignant disease in his countenance.

He stated at the time of admission, that the disease was only of four months existence, and he imputed the origin of the complaint to a blow received on the testicle from a piece of timber, from which time it has gone on gradually increasing in size. The testicle is now about three times its natural size, and has truly the feel of a "marble body within the scrotum," and somewhat irregular on its surface; the epididymis is equally hard, but the natural separation between this part and the body of the testicle remains perfectly distinct. The spermatic chord is much enlarged and very hard, as may be felt throughout the passage in the inguinal canal, and above this part is a tumour within the abdomen, but which may be distinguished through the parietes. The integuments of the scrotum are not discoloured except at one small spot; they are slightly adherent to the diseased testicle.

The patient complains of lancinating pains extending to the loins. The general health, however, is not much impaired, and he is anxious to get rid of the disease by an operation.

Sir A. COOPER, upon examining this patient, remarked, "This is a specimen of a rare disease; it is a case of true scirrhus." In allusion to the exciting cause stated by the patient as the origin of this complaint, namely, the blow, Sir A. remarked, that patients were always in the habit of imputing these kinds of disease to false causes—to some particular accident received, which directed their attention to a part in which, perhaps, chronic disease might have existed, unnoticed, for a long time previous to the accident. In the present case, Sir A. COOPER considered the rapid progress of the disease, in four months, (which was the time since the blow was received,) rendered it probable that the patient in *this* case was

not mistaken. Sir A. observed, however, that he believed blows or injuries to the testicles in a constitution predisposed to cancer, might call into action that disease, in the same manner as cancerous disease in the female mamma often owes its origin to a blow received on that part.

It is proposed to perform the operation of castration within the course of a few days. Leeches have been applied to the part, which have diminished the pain, and the bowels have been opened by the exhibition of occasional purgatives.

Operation.

On Tuesday, Oct. 4th, Mr. MORGAN performed the operation of castration. This was in a case of scrofulous disease of the testicle. Upon making a section of the diseased part, the natural structure was found to be entirely destroyed, and it was converted into a curdy white mass.

Extensive Chronic Tumour of the Thigh.

Henry Cutt, ætat 42, was admitted September 28th, under the care of Mr. KEY, with a very large swelling occupying the upper part of the left thigh. The patient stated that this tumour was of seven years' existence, and he sought relief now rather from its inconvenience on account of size than from any pain occasioned by it. The tumour (to use a familiar comparison) is about the size of an half-quartern loaf; it is very firm, yielding, however, to continued pressure. It appears to be deeply situated, and extends from Poupart's ligament obliquely downward, occupying about two thirds of the inside of the thigh. The integuments covering this tumour are not discoloured; very large veins are running over it, and there is somewhat an irregular or uneven feel on its upper surface. The femoral artery is completely pushed out from its natural situation, and may be felt strongly pulsating on the outer side of this swelling. It does not appear that much interruption is given to the circulation in the limb; there is no œdematous swelling, coldness, or numbness of the leg. The patient is a labouring man, of florid complexion and very healthy in appearance, and he states that his general health has always been good.

Sir A. COOPER has seen this patient, and he considers the tumour to be of the simple chronic kind, which sometimes go on increasing to an enormous size. About four months since Sir A. COOPER was consulted by a young gentleman who had a very extensive swelling of this nature on the back part of the thigh, which Sir A. thought proper to attempt the removal of. After the operation had commenced, it was found that the swelling extended so far into the ham, that there would be great danger of wounding the sciatic nerve and popliteal artery; Sir A. COOPER therefore desisted from any further attempt to remove it, and directed the application of nitric acid to the tumour thus exposed; the effect of this application was that the tumour sloughed away entirely, and the patient got well.

Sir A. COOPER recommended that a similar plan should be adopted in the present case; as yet nothing has been done.

ST. THOMAS'S HOSPITAL.

Case of Amaurosis.

R. Briant, a tailor by trade and about 30 years of age, came into the Hospital nine weeks since, under the care of Mr. TYRRELL, with the left eye perfectly amaurotic and with irregular pupil of the right eye. The patient stated that the left eye began to be dim about two years since, and this dimness came on without inflammation of the eye and in the absence of pain in the eye or head. At this period he experienced the sensation of what are usually termed muscæ volitantes; the imperfect state of vision increased until it amounted to total deprivation of sight. With respect to the disease in the right eye, the pupil is irregular from adhesions between the iris and anterior part of the capsule, in consequence of syphilitic iritis. The patient was taking mercury for venereal eruptions, pains in the limbs and sore throat, when, from imprudent exposure to cold, an attack of iritis supervened, for which he was profusely salivated.

The left eye, as at first stated, is completely deprived of the power of vision, but the iris remains free and active, which is a symptom often observed, and may readily be explained when we consider that the ciliary nerves, which pass to the iris, arise from the lenticular ganglion, and consequently are not at all connected with the optic or first pair of nerves, in which the disease is situated. On the other hand, the nerves of the iris may be paralytic whilst the optic nerves are unimpaired; and of this a case may be seen in Guy's Hospital at the present time.

The appearance of the eye, too, is natural; no unusual convexity or flaccidity of the globe, and the cornea is transparent. In a case like this, where no par-

ticular knowledge can be obtained of the cause of blindness there is of course no clear indication as to the mode of treatment. Mr. TYRRELL determined upon submitting the patient to the action of mercury, not only with a view of relieving the left eye, but also with the intention of promoting the absorption of the adhesive matter between the capsule of the lens and the iris of the right eye, which produced irregularity of the pupil and defective vision. In addition to this symptom, the iris had a dull and unnatural appearance, as if some mischief were still going on; red vessels were seen passing over the transparent cornea.

Two days after admission into the Hospital, the patient was directed to take calomel one grain, opium one third of a grain, three times a day, and to apply the extract of belladonna on the superciliary ridge of the right eye. In about a fortnight the mouth became much affected and the calomel was suspended for a few days, after which the pill was exhibited every night, and indeed, has been continued up to the present time. In addition to this, the patient has rubbed in upon the temple, every night,

Strong mercurial ointment, 12 *grains*,
Powdered opium, 2 *grains*.

A gentle action has been kept up in the system from the use of mercury, for several weeks, without producing any change in the state of vision in the left eye; but the remnant of vision in the right eye has been preserved if not improved, by the exhibition of mercury. The slow disorganizing process which was going on in the iris has been arrested; the adhesions between the capsule and iris have not been lessened apparently, and it is probable the coagulable lymph deposited has been organized, and thus is enabled to resist the action of mercury.

BARTHOLOMEW'S HOSPITAL.

Case of Syphilitic Iritis.

William Watkins, aged 20, was sent by Mr. LAWRENCE from the Eye Infirmary to St. Bartholomew's Hospital. He said that, about three months ago, he had a chancre on the penis, for which he was admitted into Guy's Hospital, took mercury, and was cured, and had left the Hospital about two months before. Ten days ago he felt pain in the eye and dimness of sight, which dimness had increased up to the present time. The pain, which he said was seated in the brow, was so great at night as to prevent him sleeping; during the day-time, however, he felt easy. These nightly exacerbations, Mr. L. remarked, were peculiar to the syphilitic form of the disease, which was not always easy to distinguish from the idiopathic, judging merely from the appearance of the eye.

We must inquire into the history of the case, and examine the concomitant symptoms. Syphilitic iritis was often combined with other secondary symptoms, such as sore throat or eruptions, neither of which were to be seen in this case; but, he added, that the present was so beautiful an illustration of this form of the disease, and all its characters so clearly depicted in the appearance of the eye itself, that he could at once pronounce it to be syphilitic, without inquiring either into its history or its concomitant symptoms, change of colour, and loss of brilliancy of the iris. He said, that deposition of new matter was one of the chief characters of this inflammation;—altering the colour of the part, destroying its brilliancy, thickening its texture, destroying its motions, connecting it to the surrounding parts, and tending to obstruct the pupillary aperture (complete closure of which was not often seen, as cases were seldom allowed to run to that extent). He told the pupils to contrast the brilliant grey colour of the sound with the dull green of the inflamed eye—its thickened texture, and consequent sluggish motions. These symptoms, he said, were those of every form of iritis; but what particularly marked this as syphilitic, was the effusion of reddish globules of lymph on the surface of the iris and pupillary margin; a brownish red zone round the cornea, which in the idiopathic form was of a pink colour; and the drawing down of the pupil towards the root of the nose. He next directed their attention to the globe of the eye, where no general vascularity was to be observed, but several large vessels were seen running towards the iris, and these were more numerous where the lymph had been deposited. As to the treatment, he never depended on bleeding alone to subdue iritis; it might mitigate the inflammation, but would not assist the action of vessels to take up lymph,—this was to be accomplished only by the use of mercury, and in such a manner as to affect the system. Some authors had said that mercury caused iritis; that it should be the cause and the cure he thought contradictory: to him it appeared to possess the power of arresting the destructive process, and remedying the bad effects already produced by the inflammation. As soon as

the mouth becomes affected, the redness diminishes, the lymph is absorbed, the sight improves.

September 19th. Applic. cucurb. cruent. ad ʒxii. to the left temple; calomel three grains, jalap 12 grains; immediately after its operation, two grains of calomel and one-third of a grain of opium every sixth hour; mercurial ointment six grains, containing two grains of opium, to be rubbed on the brows at night. This, Mr. L. said, often prevented entirely the nightly exacerbations of pain, or at least mitigated them so greatly as to allow the patient to rest. The extractum belladonnæ to be applied round the eye.

20th. He said that he had rested better; inflammation of the eye unabated, but the pupil dilated by the belladonnæ. We could now perceive two bands of lymph connecting the margin of the pupil to the capsule of the lens.

21st. Inflammation higher; complains much pain in the brow; purged by the mercury; ordered to increase the powdered opium from one-third to half a grain, and to take it with the mercury every four hours. Cupping to 12 ounces.

22d. Mouth slightly affected; inflammation less; complains of less pain.

23d. Perceptible decrease of the zone round the cornea; no pain in the eye; pupil dilated by the belladonnæ; sight improved.

24th. From this time the case did well, and the patient was discharged, his sight perfectly restored

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Case of Compound Fracture of the Tibia.

James Jones, ætat. 45, a very stout and strong man, was brought into Rahere's ward, with a compound fracture of the tibia, on the 10th of September. The accident happened in consequence of a large piece of timber falling on the leg, by which the lower part of the tibia was comminuted. There was a small wound in the integuments, corresponding in situation with the fracture, which was about two inches and a half from the malleolus, the limb was placed in a fracture-box, and cold applications applied.

11th. Has passed a restless night, pulse rather quick, bowels not open—owing to his having moved the limb much during the night it was not in a proper position, which being observed by Mr. Wormald, the House Surgeon, he replaced it as before, ordered him to take two grains of calomel and twelve of jalap, and the house medicine as often as necessary.

12th and 13th. The wound looked healthy, and began to discharge; the patient going on well; his bowels open.

14th. Passed a restless night; rather feverish; tongue white; bowels regular; the limb is to-day considerably inflamed. The application of twelve leeches was ordered, and afterwards a poultice.

15th. Passed a better night; relieved by the leeches.

16th. To-day, the inflammation having increased, eighteen leeches were ordered to be applied.

17th. Better night; bowels kept open by doses of calomel and jalap, and house physic. The inflammation of the leg is somewhat diminished.

18th. The limb still continuing inflamed, Mr. Lawrence ordered ten leeches to be applied.

19th. A piece of the tibia was removed about an inch in length and three-fourths in breadth, the inflammation being decidedly diminished.

On the 23d, a still larger portion was removed, but with difficulty; the patient appeared to be going on well, the discharge from the limb being copious and healthy.

On the 28th, however, a copious hæmorrhage occurred from the wound; the state of the patient was now very unfavourable. A slight hæmorrhage took place on the 29th; and on the 1st of October Mr. Lawrence said he feared amputation would be necessary if the bleeding should again occur.

Oct. 5th. The bleeding having occurred slightly yesterday, and again to-day, a consultation of the surgeons was held, at which amputation was determined on. Mr. Lawrence removed the limb below the knee.

7th. The patient has been tolerably well since the operation; to-day the dressings were removed, and irritative inflammation having taken place, a dose of rhubarb and magnesia was ordered, and eight ounces of wine to be taken daily, and a bread poultice to the stump. This case is now going on well.

Mr. Lawrence, with the desire of never letting slip an opportunity of instructing the pupils, took home the limb, carefully dissected it, and brought it to the Hospital, where he exhibited and carefully described its state to each individual student.

The fractured portions of bone were healthy; although there was an absence of a considerable portion. The arteries were much diseased. The internal coat of the anterior and posterior tibials was much thickened, with a slight deposition of calcareous matter. An opening was discovered in the anterior tibial, three

lines below the fracture, from whence the hæmorrhage arose. It was doubtful whether the opening was occasioned by the sharp projecting end of the tibia, or by the common process of inflammation in the diseased vessel.

Case of Small Pox, in which Lunar Caustic was tried.

A short time since a man was admitted into this Hospital with small pox, occurring after vaccination. Mr. LAWRENCE ordered the solution of lunar caustic to be applied to the pustules on the face, according to the suggestion of Mons. VELPEAN, mentioned in THE LANCET, Vol. viii. It seemed to have the effect of shortening the duration of the pustules; but, as the pock was of a very mild character, very little could be deduced from its effect in diminishing the marks. The operations since our last, have been two cases of paracentesis abdominis, and two amputations of the leg, by Mr. LAWRENCE; those of lithotomy and amputation of a fore-arm, by Mr. EARLE; and of a leg, by Mr. VINCENT.

ST. GEORGE'S HOSPITAL.

Case of Injury of the Head.

W. Power, aged 26, of a full plethoric habit, was admitted into the Hospital, Sept. 26th, and placed under the care of Mr. KEATE. On his admission, from intoxication and the effects of the injury, he was totally incapable of giving any account whatever of the manner in which he came by the accident; but we learned from one of the men who brought him to the Hospital, that he had been quarrelling, and that he had been stunned for more than half an hour after the accident, and that there had been great hæmorrhage from the head. On examination there were found to be two extensive scalp wounds on the top of the head, and a deep lacerated wound on the frontal bone, situated between the two eyebrows, which left the bone denuded (but no fracture could be traced.) The wounds of the scalp he said were inflicted by a pewter measure; and that of the forehead by a poker. The wounds were dressed with adhesive straps. The patient was bled to ℥xij.; ordered to have some house physic directly, and to keep the head constantly wet with the spirit lotion.

27th. Passed a bad night, complains of great pain and tension all over the head; tongue is dry and covered with a white fur; pulse full and strong; bowels have not been open; he was ordered to be bled to ℥xij., and to take four grains of calomel with fifteen grains of the extract of colocynth, immediately, and to have the saline draught every four hours with the addition of half a drachm of antimonial wine, and one and a half drachms of sulphat of magnesia.

28th. Has passed a better night, pain and tension of the head greatly relieved. The wound of the forehead looks very irritable, and the surrounding parts are inflamed and somewhat tumified; the pulse is still hurried; tongue greatly furred; the bowels have been freely opened. A poultice was ordered to be applied to the wound in the forehead; and the lotion and medicine to be continued.

29th. Has passed a very indifferent night, had no sleep; pulse 105 and soft; face flushed; the wound of the forehead presents a very unhealthy looking sore, but the surrounding parts are less tumified; the wounds on the scalp are looking healthy, and seem disposed to heal; the same medicine as yesterday.

30th. Passed a much better night, had a good deal of sleep; the countenance is less flushed; says that he has no pain except above the left eyebrow, which is a little swelled; pulse 96; bowels have been freely open; repeat the medicine.

October 3d. The patient has been free from pain since our last report, till this morning, when he was seized with a pain in the back part of the head and neck, accompanied with vertigo and dimness of sight; pulse 108 and wiry; tongue dry and covered with a white fur; bowels costive; he was ordered to take five grains of calomel with fifteen of rhubarb, and to continue the saline draught with antimonial wine and sulphas magnesiæ. The lotion and poultices to be continued.

4th. Passed a very bad night, had no sleep; the pain has extended all over the head, and there is a slight puffiness of the scalp; pulse 104 and moderately firm; tongue still furred; the bowels have been well open; the same medicine as yesterday.

5th. The patient is not much relieved, the pain in the head still continues; there is considerable heat of the scalp; the eyes look dull and have a glossy appearance; the pulse 100 and weak; tongue more clean at the edges; the bowels are well open; the same medicine as yesterday.

6th. Rather better to-day; pulse 108 and soft; and he is prefectly rational; says he has less pain in the head; and

there is less swelling of the scalp; and he slept well in the night; the tongue still continues furred in the centre; repeat the medicines.

7th. Pulse always continues quick and weak; and the patient, in other respects, is much the same.

LONDON HOSPITAL.

Case of Extravasation of Urine.

On Saturday October 1st, a poor man, about 60 years of age, was admitted into Mellish's ward, suffering under extravasation. The scrotum and penis were enormously distended, and appeared to the touch to contain something of the consistence of jelly. He complained of great tenderness in the hypogastric region; his tongue was covered with a brown fur, and his pulse was rather small. There were two fistulous openings in the scrotum, but we were unable to obtain any information respecting them, except that he had occasionally passed his urine by these channels.

The surgeon for the week was Mr. ANDREWS; but the House Surgeons, from some cause, did not think proper * to send for him, but as soon as the anatomical lecture was over, (which was half an hour after the patient's admission,) they requested Mr. HEADINGTON to see the case.

He immediately decided upon cutting into the perinæum, and with a scalpel made an incision about two inches long, parallel with the raphe, and commencing close to the scrotum. A quantity of urine immediately flowed out. Upon introducing the finger a cavity was found mostly filled with a substance having the consistence of jelly, and which Mr. H. observed was sloughing cellular substance. The scrotum and penis were scarified in several places, and the patient was ordered to have a poultice applied to the part. He had a dose of castor oil given him, and was put upon full diet with wine.

On the *next* day (Sunday) he was much worse; his pulse was irregular and scarcely perceptible; tongue covered with a dark brown fur; laborious respiration; great pain and tenderness in the hypogastric region. He was seen by Mr. ANDREWS, and ordered one grain of the sulphate of quinine every four hours, and as much wine and brandy as he could take.

He continued getting worse, and died at ten o'clock on Monday evening. His friends would not permit a post-mortem examination.

* The only reason that we have heard assigned for not sending for Mr. ANDREWS was, that the case was not of SUFFICIENT IMPORTANCE!!!!

Case of Erysipelas.

—— Crosswell, aged 40, was admitted into Mellish's Ward, on Saturday Oct. 1st, under the care of Mr. ANDREWS, having erysipelas of the leg, in consequence of a slight bruise on the front of the tibia.

He had applied to a surgeon a few days previous to his admission, who ordered 17 leeches to his leg, and purged him freely; for the last two days, however, he has not had a passage through his bowels. He had been much addicted to the use of ardent spirits. The erysipelas extended from the knee to the ancle; the leg was very œdematous; patient delirious. Was ordered by the dresser a dose of castor oil, and to apply a poultice to his leg.

The next day (Sunday) was much worse; pulse small and irregular; tongue furred; delirious. He was ordered a grain of the sulphate of quinine with ammonia* every four hours, and as much wine and brandy as he could take.

In the evening he became much worse, and it was found necessary to use the strait waistcoat. He died the following morning about two o'clock.

It may be remarked here, that the surgeons of this Hospital are not at all agreed as to the best treatment of erysipelas. Mr. HEADINGTON adopts Mr. ABERNETHY's opinion, viz. that the disease arises from some disorder of the digestive organs; and in his treatment depends on the use of emetics, followed by brisk purgatives.

The other surgeons (Sir W. BLIZARD, Mr. ANDREWS, and Mr. HARKNESS) see nothing but debility in erysipelas, and therefore treat it upon Dr. FORDYCE's plan, namely, the throwing in as much bark and wine as the patient can take.

Neither of these modes of treatment should be invariably adopted. There are undoubtedly some cases of erysipelas which will be benefited by the use of bark and wine;—there are others in which Mr. ABERNETHY's treatment may be adopted; but there are some cases in which neither of these modes of treatment is to be depended on; but which require the strictest antiphlogistic treatment. We think the surgeons of this Hospital would be much benefited by observing Mr. LAWRENCE's treatment of erysipelas at St. Bartholomew's.

* This is a most unchemical mixture.—We may, perhaps, here take notice of the small doses in which the sulphate of quinine is administered. If this substance be quite *genuine* (which, by the bye, it seldom is) it ought to be in at least two or three grain doses.

Case of Concussion with Fracture of the Clavicle.

Abraham Lincey, aged 64, was admitted on Monday Oct. 3rd, into Mellish's Ward, under the care of Mr. ANDREWS, labouring under concussion of the brain, and having a fractured clavicle. The accident was caused by a heavy weight falling on his head and shoulder.

When brought in, his pulse was scarcely perceptible; the pupils of his eyes were contracted, and he talked incoherently. There had been some hæmorrhage from the right ear. As soon as reaction had taken place, he was bled to sixteen ounces, and ordered to take 16 grains of jalap with four grains of calomel immediately. In the evening he was delirious, and it was necessary to apply the strait waistcoat.

Tuesday. Pulse small and slow, but irregular; quite delirious, but more quiet than last night; his bowels have been opened once during the night. The powder was ordered to be repeated.

Wednesday. Pulse small, hard and slow; appeared to know a woman who came to see him. This morning he took one drop of the croton oil, which has not operated. He was ordered to be bled to ℥xij., and to have twelve leeches applied to the temples.

Thursday. Appears to be sinking; pulse slow, hard and small; the pupils are contracted; is speechless. This morning he took a little bread and milk for the first time. Ordered to take some opening medicine.

Friday. Has been freely purged; pulse 132: skin hot; still insensible and speechless; refuses to take any nourishment.

Saturday. Died this morning between seven and eight o'clock.

The post-mortem examination (if any be allowed) we shall detail in our next number.

In commenting on the above case, we cannot say it adds much to the chirurgical reputation of the Hospital. From the above account, this man ought to have been bled again on the Monday evening, or at least on the Tuesday. Instead of this, 48 hours are allowed to elapse before the venesection is repeated, although the marks of inflammatory action were unequivocal.

LONDON OPHTHALMIC INFIRMARY, MOORFIELDS.

Margaret Blanchard, aged 14, of a light complexion, and blue eyes, was admitted an out-patient of this Infirmary, Sept. 20, 1825, under the care of Mr. LAWRENCE. She says, that for the last six months, she has been almost blind of the left eye, and that this defective state of vision came on gradually. For a great length of time before the eye became affected, she had pain in the head more or less violent, particularly in the superciliary and temporal regions of the left side; of this pain she still complains. She sees very well with the right eye, but cannot with the left distinguish the number of her card of admission, the figures of which are two inches in length. There is not any apparent difference between the two eyes. The iris of each is sluggish. Menstruation has not yet commenced, and her bowels are costive.

Habeat hirudines vj. *tempori sinist.;*
Emplast. lyttæ mediocre nuchæ;
Hydrarg. submur cum pulv. jalapæ statim
Hydrarg. c. cretâ gr. v. *bis quotidie.*

29th. Since the leeches and blister were applied, the pain in the head has been much relieved, but has returned this morning. She can now see to read large print with the left eye. Bowels open; let the leeches and blister be repeated, and let her take the medicine three times a-day.

Oct. 11. She has had no pain in the head since the leeches and blister were last applied, and she can now see to read small print as well with the left as with the right eye. She is about to be discharged.

Hemeralopia.

Charles Wise, a Swedish sailor, æt. 26, applied Sept. 22d, 1825, for advice under the following circumstances. As soon as the sun goes down, he becomes perfectly blind, and remains in this state till daylight in the morning. The complaint came on about two months ago, when he was in Jamaica. The pupils are rather dilated, and the eyes are dark coloured. Mr LAWRENCE resolved to try the effects of blistering only in this case (a blister to be applied to each of the temples, and to be repeated as fast as it healed.)

27th. The man came to-day and said, that he was quite recovered. Mr. L. advised him to attend from time to time, as the complaint was liable to return. The patient, however, was again going to sea.